

#### NORTHERN DUTCHESS AQUATIC CLUB PARENT PERMISSION FORMS

Following are permission forms for exception our Minor Athlete Abuse Prevention Program (MAAPP).

As a general policy, NDAC does not encourage that these exceptions occur, but if they do we request that the parent(s) involved complete and sign the appropriate waiver, and then submit a copy of the signed form to the NDAC SafeSport Coordinator (e-mail to admin@ndac.us) prior to the actual activity / situation occurring.

#### Permission forms following are for:

- <u>A licensed massage therapist or other certified profession or health care provider to treat</u> a minor athlete
- An unrelated applicable adult to travel to competition alone with a minor athlete
- An unrelated applicable adult to provide local transportation to a minor athlete
- An unrelated adult athlete to share the same hotel, sleeping arrangement, or overnight lodging with a minor athlete



# PERMISSION FOR A LICENSED MASSAGE THERAPIST OR OTHER CERTIFIED PROFESSIONAL OR HEALTH CARE PROVIDER TO TREAT A MINOR ATHLETE

I,	_, legal guardian of	,	a minor
athlete, give express written permis	sion, and grant an exception to the Mir	or Athlete Abuse Pr	evention
Policy for	(massage therapist or other	certified professional	l) to
provide a massage, rubdown and/o	r athletic training modality on		
	(minor athlete) on	(date)	
at	(location). The massage, rubdown o	r athletic training mo	dality must
be done with at least one other adu	It present in the room and must never l	oe done with only _	
(minor athlete) and _	(massa	age therapist or othe	er certified
professional) in the room. I acknowle	edge that I have the right to observe the	ne massage, rubdow	n or
athletic training modality. I further ad	cknowledge that this written permission	is valid only for the	dates and
location specified herein.			
Legal Guardian Signature:			



# PERMISSION FOR AN UNRELATED APPLICABLE ADULT TO TRAVEL TO COMPETITION ALONE WITH MINOR ATHLETE

I,, legal guardia	n of, a minor
athlete, give express written permission, and grant	an exception to the Minor Athlete Abuse Prevention
Policy for	_ (minor athlete), to travel with
(Applicable Adult), to travel from	(point of origin) to
(destination) to attend the	(name of
competition)	
from to (dates of travel to co	mpetition).
I acknowledge that	_ (minor athlete) cannot share a hotel room, sleeping
arrangement or other overnight lodging location wit	h (Applicable
Adult) at any time. I further acknowledge that this w	ritten permission is valid only for the dates and
location specified herein.	
Legal Guardian Signature:	
Date:	



# PERMISSION FOR AN UNRELATED APPLICABLE ADULT TO PROVIDE LOCAL TRANSPORTATION TO MINOR ATHLETE

I,, legal	guardian of	, a minor		
athlete, give express written permission, and grant an exception to the Minor Athlete Abuse Prevention				
Policy for	_, an unrelated Applicable	Adult to provide local vehicle		
transportation to	(minor athlete)	to		
(destination) on (date(	s))			
at(approximate time), and further acknowledge that this written permission is valid only for the transportation on the specified date and to the specified location.				
Legal Guardian Signature:				
Date:				



### PERMISSION FOR AN UNRELATED ADULT ATHLETE TO SHARE THE SAME HOTEL, SLEEPING ARRANGEMENT OR OVERNIGHT LODGING LOCATION WITH MINOR ATHLETE

I,	, legal guardian of	, a minor		
athlete, give express written	permission, and grant an exception to the Minor	Athlete Abuse Prevention		
Policy for	(minor athlete), to stay in the same hotel room of, or share			
a sleeping arrangement or o	ther overnight lodging location			
with	(unrelated adult athlete)			
at	(location of hotel room or other overnight lodging location) from			
to	_ (dates of applicable rooming arrangement).	I further acknowledge		
that this written permission is valid only for the dates and location specified herein.				
Legal Guardian Signature: _				
Date:				