

ANNUAL CONSENT FOR INDIVIDUAL TRAINING SESSIONS

l,	, as the parent/legal
guardian of	
authorize and consent for said minor athlete to	receive individual training
sessions from	, an Adult Participant,
for a time period of one year from the date of this consent.	
I understand the following are the guidelines fo	or Individual Training Sessions:
1. All sessions must follow the One-on-One inte Minor Athlete Abuse Prevention Policy.	eractions policy as found in the
2. A parent/legal guardian can observe the sess	sion.
I can withdraw my consent for the individual tra	aining sessions at any time.
Parent/Legal Guardian Name Printed:	
Parent/Legal Guardian Signature:	
Date:	