**PARTICIPANT CONSENT FORM**

**To comply with GDPR**

This form must be completed and signed by the parent or guardian if the participant is under 16 years old and by the participant if they are over 16 years, and returned to the programme organiser. All consent forms are valid from 1st May 2018 until 30th April 2019.

Any changes required to the information recorded on this form after its submission MUST be passed to Central London Lacrosse in writing, as soon as possible.

Participant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant E-mail: ­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant Date(s) of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Central London Lacrosse will use this information solely for the use of communicating with you regarding Lacrosse. We will not pass on your information to any other member without your explicit consent.**

**Declaration:** Central London Lacrosse, the Junior Managers, Coaches or Committee members may contact me by:

Please mark the box to give your consent:

Email Phone

I confirm that I agree for this information to be shared in hard copy or electronically with Central London Lacrosse committee and coaches as required.

Signature: ……………..……………………… Date: ……………