Table of Contents

3. Parents 1

Parent Code of Conduct 1

Parental Consent Form and Medical Information 3

Financial Assistance 5

4. Volunteers 6

Volunteer Code of Conduct 6

# 3. Parents

## Parent Code of Conduct

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*) is committed to ensuring that all players have the opportunity to participate in a safe and welcoming environment that is encouraging and promotes their overall development. Parents have an enormous influence over their child’s experiences in the sport.

In this code “parents” shall refer to “parents and guardians”. This code applies to all

parents that is a member of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*) or whose child is a member/player of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*).

Parents shall abide by this code at all times while participating in any \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*), competition, practice or other club activity.

* All parents are expected to conduct themselves in a responsible manner consistent with the values of fair play, integrity, open communication and mutual respect.
* Parents shall always model positive and responsible behavior, and communicate with their son/daughter that they expect them to do the same. Parents will assume the major responsibility for their son/daughter’s conduct and attitude.
* Parents shall treat all individuals and property with dignity, courtesy, and respect, including but not limited to other players, coaches, officials, volunteers, other parents, and all other individuals that are part of the club.
* Parents shall refrain from any behaviour, or comments, which are profane, insulting, harassing, sexist, racist, abusive, disrespectful or otherwise offensive without hostility or violence.
* Parents shall emphasize the importance of values like sportsmanship, respect, cooperation, competition and teamwork to their son/daughter offering praise for fair play, participation, and skill development.
* Parents shall instill confidence in their son/daughter’s ability and skill development, always avoiding comparisons with other players.
* Parents shall celebrate the acquisition of skills and goals achieved by their son/daughter.
* Parents shall respect the coach and understands the coach is responsible for the skill development of the athlete. A parent’s role shall be to take a healthy interest in their child’s progress and development and be responsible for the child’s nutrition, rest, overall health, and moral and emotional support.
* Parents shall ensure their son/daughter is on time to practices, competitions and other club events.
* Parents shall never provide alcohol or drugs to minors in a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*) environment, and Parents shall never provide or advocate the use of performance enhancing drugs or substances.
* Parents shall openly support and uphold this code of conduct policy and take action and steps to ensure other parents follow and uphold this code of conduct policy.
* Parents shall adhere to the policies, procedures, rules, standards, and ethics of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*) at all times.

“By signing this Parent Code of Conduct I acknowledge that I have read and agree to support all of the above statements.”

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date

## Parental Consent Form and Medical Information

*To be signed at the time of registration*

*Keep at all sporting and training facilities at all times*

**Player Information**

Youth’s Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Given Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Athlete Medical Information**

Physician’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Care Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the player Have Any Allergies? \_\_\_\_\_\_ Yes \_\_\_\_\_\_ No If yes, please list below:

Food: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Medicine: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Medical Concerns: \_\_\_\_\_\_\_ Yes \_\_\_\_\_\_\_ No

If yes, please list: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list all medication (prescription and non-prescription) that the youth will be taking or bringing along: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parental/ Guardian Information**

Name of Parent/Guardian #1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: ­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent/Guardian #2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: ­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Parental Consent****Commitment to Parent Code of Conduct** By signing below I have read and agree to follow the Parents Code of Conduct as found in the Club Handbook and website. **Medical Emergency**I hereby certify that I am the parent/guardian of \_\_\_\_\_­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,Who is under the age of 18 years of age and I hereby consent to any emergency medical procedures, which may be deemed necessary by a licensed medical practitioner as a result of his/her involvement in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*) activity including travel and out-of town events. I understand I will be notified by the quickest means possible in the event of an emergency. **Photo/Video Release**On occasion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*) may use literature, photos and video to promote \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*) to the general public. I hereby consent to the use of my and or my child’s name, photograph, photographic likeness, recorded voice and/or image in video that may appear in any publications, promotional posters, flyers, brochures, printed and electronic ads or electronic media, in addition to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*)’s website. I understand that I will not receive compensation in any form from the use of my and or my child’s photograph or my photographic likeness and recorded voice. Signature of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

## Financial Assistance

*Provide an area on your website for families and parents to learn about other financial assistance programs that are available to be able to pay for club fees. See the example:*

At \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*) we try our best to ensure participation fees are affordable. However, if a low-income situation makes it challenging to register for a player, there are some options to cover the cost. Here are some possible resources:

**KidSport BC**

* Financial assistance for league or club fees for children and youth.
* Apply to the chapter in the city or town that you live in. If you do not see your city or town on the list, apply to the provincial chapter.

Click HERE <http://www.kidsportcanada.ca/british-columbia/find-a-chapter/>

**JumpStart**

* Financial assistance for sport or recreation participation fees for children and youth.
* Phone the number provided for information about how to apply.

Click HERE <http://jumpstart.canadiantire.ca/en/what-we-do/how-to-apply>

**Athletics 4 Kids**

* Financial assistance for league or club fees for children and youth in British Columbia
* Apply online through the website

CLICK HERE <http://www.a4k.ca/applicants/>

Note: These programs typically assess family income to determine eligibility for financial assistance, not just the income of the individual applying.

# 4. Volunteers

## Volunteer Code of Conduct

In the interest of the participants that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*) serves, volunteers commit to observing the following code of conduct.

* **Treat everyone fairly** within the context of their activity, regardless of gender, ethnic background, colour, sexual orientation, religion, political belief or economic status;
* Agree to conduct yourself in a manner consistent with the position as a positive role model, and as a representative of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*);
* Follow \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*) Constitution, By-Laws and/or Operating Rules of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*);
* Respect the privacy and dignity of participants by not divulging confidential information without consent, except where required by law as in the case of suspected child abuse;
* Consistently **display high personal standards** and project a **favourable image** of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*).
* **Refrain** from **public criticism** of fellow members.
* **Abstain** from and **discourage** the use of **drugs, alcohol and tobacco** products in conjunction with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(*Insert Club Name*).
* **Refrain** from the use of profane, insulting, harassing or otherwise **offensive language** while volunteering.
* Regularly seek ways of **increasing professional development** and self-awareness.
* **Co-operate** with the athletes' **parents** or **legal guardians**, involving them in their child's development.

**You must:**

* Ensure the **safety** of the athletes with whom you work.
* **Respect** others' **dignity**; verbal or physical behaviors that constitute harassment or abuse are unacceptable.
* **Never advocate** or **condone** the use of **drugs** or other **banned** performance enhancing **substances**.
* **Never** provide **underage** athletes with **drugs, alcohol or tobacco** products.

|  |
| --- |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ agree to abide by the following code. Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |