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BCU ANTI-DOPING – PARENTAL CONSENT FORM

This form must be completed in all cases where the athlete is under the age of eighteen (18).

Please complete in BLOCK CAPITALS

I **[insert full name]** _____
 declare that I am the person having parental responsibility of **[insert full name of Athlete]**

_____ (“the Athlete”)
 and that I have full capacity to give consent to the taking of a blood or urine Sample as required by the anti-doping rules of the British Canoe Union (“the Rules”)

I have read and understood the ICF and UK anti-doping rules of the British Canoe Union, and I hereby:

(a) agree that the Athlete will be bound by and comply with the provisions set out in the anti-doping rules of the British Canoe Union and will submit to the authority and jurisdiction of the British Canoe Union and any designee(s) of the Canoe Association of Northern Ireland, Canoe Wales and the Scottish Canoe Association including the International Canoe Federation and UK Anti-Doping, to apply, police and enforce the rules; and

(b) consent and agree to the taking of a blood or urine sample from the Athlete for the purposes of official anti-doping Testing (whether such Testing is organised by the British Canoe Union, International Canoe Federation, UK Anti-Doping or any other official body) in accordance with the procedures set out in the ICF and UK Anti-Doping Procedures Guide and the International Standard for Testing.

Dated this day of..... 20.....

Full Name of Parent / Guardian

Signature of Parent / Guardian

Full Name of Athlete.....

Signature of Athlete.....

BCU Number of Athlete..... Discipline.....

Completed forms should be returned to
 Andy Goodsell – BCU Competition Manager
 Direct Line – 0845 370 9528 Mobile – 07976 515258
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