

 <small>clane gaa 1884</small>	<b>Overnight Permission Form</b>	PIP	Issue No. 1
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# Clane GAA Overnight Permission Form

*Clane GAA promotes and implements a code of behaviour that encourages fair play, respect, equality and safety.*

**Team:** \_\_\_\_\_ **Event/ Game:** \_\_\_\_\_

**Name of Child:** \_\_\_\_\_

**Venue:** \_\_\_\_\_

**Dates (from/to):** \_\_\_\_\_

**Overnight Accommodation:** \_\_\_\_\_

**Contact Number and Name:** \_\_\_\_\_

**How we intend to get to venue games:** Bus  Lifts  Other, please specify \_\_\_\_\_

**Pick up times** \_\_\_\_\_ **Pick up location:** \_\_\_\_\_

**Drop off time:** \_\_\_\_\_ **Drop off Location:** \_\_\_\_\_

## Young Player

I have read and accept the conditions and rules set down in the Code of Ethics and Good practice for Young Players when traveling to matches and events which involve overnight stays. I agree to abide the rules of my Club and Association.

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_\_\_

## Parent/ Guardian of Player

I have read and accept the conditions and rules set down in the Code of Ethics and Good Practice for Young Players when traveling to matches and events which involve overnight stays.

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_\_\_

Emergency contact number: \_\_\_\_\_

Any known allergies or medical conditions: \_\_\_\_\_