



Emergency Medical Treatment Form

Child's/Adults Forename: _____ Surname: _____

Date of Birth: _____ Age: _____

Doctor's Name: _____

Doctor's Address: _____

_____ Postcode: _____

Doctor's Telephone Number: _____

Any relevant Medical Information / Conditions / Family history: _____

Allergies: _____

Dietary Requirements: _____

Any other relevant information: _____

Parents/Carers First Name: _____ Surname: _____

Address: _____

_____ Postcode: _____

Emergency Contact Number: _____

Child's/ adults Medical Number: _____

Email address: _____

In the event that my child/ partner is involved in a serious incident while at the course, I expect the manager, or a delegated member of staff, to contact me immediately on the above emergency contact number. In the event that my child requires immediate medical treatment before I will be able to get to the Hospital, I hereby authorise the manager, or a delegated member of staff, to consent to emergency medical treatment on my behalf. I understand that this authorisation will remain valid unless I contact the manager to withdraw it.

***Pro Cricket Academies will not accept any child on a Course/Tournament unless they are in receipt of a signed parental and medical consent form.**

Signature of Parent/partner: _____ Print Name: _____

Date: _____

Company registration number: 7040312

Company registered name: Brad Donelan Sporting Enterprises Limited but trading as Action Kids Courses

Tel: 07757-553-656

E-mail: procricketacademies@gmail.com

Web: www.procricketacademies.com



Mersey Cup Consent Form

Activities

Cricket related activities that include but not extensive:

- Matches
- Live nets on artificial surfaces
- Catching, Diving (crash & gym mats), Throwing, Running.
- Long Term Athlete Development equipment:
 - Ladders, Hurdles. Skipping ropes,
- Strength & Conditioning equipment:
 - Medicine balls, sliders, battle rope, weighted bags, Boxing gloves and pads.
- Bowling machine & Side Arm ball thrower
- Hard & soft balls
- Power hitting equipment

I consent (Childs Name):

Taking part in the activities listed above. I understand that if their behaviour is inappropriate and effects the safe running of the tournament the tournament organiser may decide to withdraw them from the tournament. No refund will be issued.

Parents/partners, relatives, carer's, siblings & friends are allowed to attend the tournament but do so at their own risk. Pro Cricket Academies will not be responsible for any accident/injury however caused.

Please sign below to accept these terms.

Signed: _____

Dated: _____

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Name *(please print)*: _____

Relationship to child: _____

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