

Parental consent for rider younger than 16 years old to participate in motocross practice at J4M54 whilst in the care of a nominated adult other than their parent or legal guardian.

Parents Name, Address & Telephone Number.

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Telephone Number:.....(Must be completed)

Date:...../...../.....

Dear J4M54

Riders Name..... Membership Number.....

I am the Father/Mother (delete as appropriate) of the above named child. My full name is.....

Although my child will be practicing at J4M54, it will not necessarily be myself who accompanies him/her (delete as appropriate).

They will be accompanied by.....and I authorise this person to act on my behalf whilst my son/daughter (delete as appropriate) participates in motocross practice at J4M54.

I have authorised them to execute any documents including parental indemnity counter signs and they will do so on my behalf & I agree to be bound by the terms & conditions of the signing on sheets.

Parent/Legal guardian signature:.....

Accompanying adult signature:.....