

**Parents/Carers**

Note: This declaration and confirmation of contact details are required in order for the player(s) in your charge to attend Dunbar United Colts' training sessions and must be provided to the Club sufficiently in advance.  A safe return to football is everyone's responsibility.

As the parent/carer responsible for …………………………………………………………………………………………………..

I have read and understood the Phase Three for Children and Young People – 5-17 Years Old (<https://www.scottishfa.co.uk/football-development/return-to-football-hub/children-and-young-people/>).  I have relayed this to …………………………………………………………….(name of player) and checked their understanding is sufficient in terms of their safety and those involved.

I appreciate the position may change and will read and follow any further club correspondence on this matter.

Name:

Signature:

Up-to-date contact details are as follows:

Player name:

Parent/Carer name:

Address:

Telephone No.

Emergency contact(s)

Name:

Telephone No(s).

This should be sent to the age group COVID co-ordinator who should inform and forward to the Club COVID co-ordinator.