

MSA under 18 Marshal Consent Form

Young person's name:

Organising club:

Organiser's contact details:

Name of event:

Date of event:

Venue(s):

Meeting time and place:

Note: All activities will be undertaken in accordance with the MSA under 18 Marshal Policies. No responsibility for the personal equipment/clothing and effects can be accepted by the organisers, as MSA Motor Clubs do not provide automatic insurance cover in respect to such items. Personal accident cover is automatically provided by the MSA for all signed-on volunteer officials – full details can be found in the current MSA Yearbook

****Please keep this section for your own information, and return the section below to the organising club****

Please complete and return this section to: by:

Name of event:

Name of young person:

Young person's home contact details:

Date of birth:

Name of adult to act as temporary carer: (if applicable)

Emergency contact: Tel:

I have read and understand the consent process requirements above and agree to the above named young person acting as a volunteer official on this event. Furthermore, where applicable, I agree that the above named adult may act as temporary carer (as referred to in the MSA Under 18 Marshal Policies) for the duration of the event.

If it becomes necessary for the above named young person to receive medical treatment, and I cannot be contacted to authorise this, I hereby give my general consent to any necessary medical treatment and, where applicable, authorise the temporary carer to sign any document required by the hospital authorities.

Note: The medical profession takes the view that the parent/guardian consent to medical treatment cannot be delegated. This is explicit in The Children's Act 1989. Thus, medical consent forms have no legal status and a doctor or nurse insisting on the consent of a parent/guardian to a particular treatment has the right to do so. However, it can be a comfort to medical staff to have general consent in advance from parents/guardians or to have a temporary carer on hand able to sign forms required by medical authorities.

Signed: (parent/guardian) Date:

Relationship to young person: