



Sussex County Indoor Bowls Association
ATHLETES UNDER 18 - TRAVEL CONSENT

Covering period 1st January – 31st December, 2018

Form B must be attached to a copy of the Athlete's Principal Consent Form A prior to travel

Name of Child

Date of Birth

I confirm that I am legally responsible for the above named child and I hereby give my consent for my child to: -

Travel with (name person, club, other body) : -

The Sussex County Indoor Bowls Association.....

To (Venue) VARIOUS.....

For the purpose of.....Playing indoor flat green lawn bowls.....

On Date VARIOUS.....

Mode of transport: Private Motor Car; Private Chartered Coach;.....

Parent/ Guardian/ Carer: -

Name.....

Address.....

Signed..... Date.....

Emergency Contact details:

Tel:..... Mobile Phone:.....

Alternative Contact Name telephone number and mobile number: -

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These telephone/ mobile numbers will be used only in the case of emergency or to inform you of changes in travel times or arrangements.