

JUNIOR PLAYER | SENIOR COMPETITION PARTICIPATION PARENTAL CONSENT FORM

Player's Name:

Birth of Date:

Parent/Guardian Name:

Full Address:

I, _____, hereby give permission for my child, named above to participate in the Irish Olympic Handball Association's Senior League and/or Cup competition.

Signed:

Date:

I, _____, being a registered IOHA Coach, am satisfied that the above-named player is of a sufficient level to participate in the IOHA Senior League and/or Cup competition.

Signature:

Name of Club:

Date:

TERMS & CONDITIONS

Completed forms must be returned to Irish Olympic Handball Association Office before the player participates in IOHA competitions.