



# LEE ON THE SOLENT GOLF CLUB

Brune Lane, Lee on the Solent, Hampshire PO13 9PB  
Tel: 023 9255 1170 E-mail: enquiries@leeegolf.co.uk

## JUNIOR OPEN – PARENTAL CONSENT FORM 2020 PLEASE SUBMIT WITH ENTRY FORM

Junior's Name .....Date of Birth .....

Address .....

..... Post Code .....

Telephone no ..... Email .....

In caring for the best interest of your Son or Daughter, it is important that Lee-on-the-Solent Golf Club knows whether He/She suffers from any medical condition or illness, or whether He/She is currently receiving medial treatment of any kind.

Please indicate below, in confidence, any health-related matters, including injuries which you feel may be relevant; including details of any prescribed medicine and dosage, or any special dietary requirements.

Asthma	Yes/No	Fits or Blackouts	Yes/No
Epilepsy	Yes/No	Diabetes	Yes/No
High Blood Pressure	Yes/No	Heart Problems	Yes/No
Migraine	Yes/No		

Other Details .....

I consent to my Son/Daughter participating in events organised by Lee-on-the-Solent Golf Club  
I consent to my Son/Daughter receiving essential medical treatment, as necessary, when a qualified medical practitioner prescribes the treatment.

I consent to my Son/Daughter having photographs taken at the presentations and being published on the Club website.

There may also be occasions where your Son/daughter may need to be carried in a vehicle by one of the junior organisers to a remote tee on the course or for medical treatment.

Name of Parent or Guardian .....

Tel no ..... Signature .....