**Minor Athlete Abuse Prevention Policy**

**Individual Training Sessions Consent**

Athlete Name Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Birth Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E Mail Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Parent\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone Work Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E Mail E Mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Athlete Individual Training Sessions Consent**

We, the undersigned parents or legal guardians of the above named athlete who is under the age of 18 years (“Athlete”), have read U.S. Ski & Snowboard’s Minor Athlete Abuse Prevention Policies (“MAAPP”) (available at [www.usskiandsnowboard.org](http://www.usskiandsnowboard.org)) and hereby authorize and consent to the Applicable Adults listed below, who are coaches or athletic trainers, to provide to Athlete individual training session that are not observable and interruptible by another adult for the 2019-2010 training and competitive season.

Parent or Guardian Signature Date

Parent or Guardian Signature Date

**Applicable Adults**: