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ANTI-DOPING PARENTAL CONSENT FORM

This form must be completed in all cases where the athlete is under the age of eighteen (18)

I, _____ (name)

confirm that I have parental / guardian authority for

_ (athlete's name)

I confirm that I have full parental responsibility for the above athlete and that I have full capacity to give consent to the taking of a blood or urine sample as required by UK Anti-Doping Rules.

As a licensed participant, I agree that the above-named athlete will be bound by the UK Anti-Doping Rules adopted by BTC as the NGB for Taekwondo in the UK and acknowledge and accept that the UK Anti-Doping Rules apply to all individuals participating in the sport for a minimum of 12 months from the commencement of the licence.

I have read the UK Anti-Doping <u>Rules</u> and I hereby:

- (1) agree that the above-named athlete will be bound by and comply with the provisions set out in the UK Anti-Doping Rules and National Governing Body <u>guidance</u>, and will submit to the authority and jurisdiction of BTC, UK Anti-Doping, UK Sport and any other authorised designee(s), to apply, police and enforce the rules; and
- (2) consent and agree to the taking of a blood or urine sample for the purposes of official antidoping testing (whether such testing is organised by BTC, UK Anti-Doping, UK Sport or any other authorised designee(s), in accordance with the procedures set out in the UK Anti-Doping Rules Article 5 and the International Standard for Testing.

I understand that a refusal to provide consent may affect the above-named athlete's involvement in BTC events and activities.

	Parent / Guardian	Athlete
Signature:		
Full Name:		
Date:		

Reviewed 27/03/2024

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