Informed Consent for Minor Participation in Individual Training Sessions

I, [INSERT LEGAL GUARDIAN NAME], certify that I am the parent or legal guardian of [INSERT MINOR’S NAME] (“Minor Athlete”). I understand that my express written consent is required in order for Minor Athlete to participate in individual training sessions with [INSERT NAME OF COACH OR TRAINER] at United States Equestrian Federation (“USEF”) licensed, endorsed, or sponsored activities (the “Training Session”) if the Training Session is not observable and interruptible by another adult. I acknowledge that the Training Session was not organized by USEF and is not affiliated with USEF in any way. I also understand that USEF’s Minor Athlete Abuse Prevention Policies prohibit Minor Athlete from participating in the Training Session unless it is observable and interruptible by another adult or I provide my express written consent.

In connection with and in consideration of Minor Athlete’s participation in the Training Session, I as Minor Athlete’s legal guardian hereby represent and consent to the following:

1) I consent and agree to allow the Minor Athlete to attend and participate in the Training Session, in connection with [INSERT EVENT/COMPETITION NAME] recognizing that it is not observable and interruptible by another adult;
2) I consent and agree that I have had the opportunity to review USEF’s Safe Sport Policy and Minor Athlete Abuse Prevention Policies, available at http://safesport.usef.org;
3) I acknowledge that USEF’s Safe Sport Policy and Minor Athlete Abuse Prevention Policies are intended to protect athletes from abuse and risks of harm in sport, and that the Training Session between an adult and Minor Athlete is permitted at USEF licensed, endorsed, sponsored activity if the Training Session is observable and interruptible by another adult. If the Training Session is not observable and interruptible by another adult, express written consent is required prior to the Training Session taking place;
4) I understand that I am allowed to observe the Training Session; and
5) I authorize and consent to the release and disclosure of this consent form, Minor Athlete’s name, Training Session details, and other relevant information, as needed, to demonstrate my consent to Minor Athlete’s participation in the Training Session.

I certify that I am 18 years of age or older and the legal guardian of the Minor Athlete. In addition, I certify that I have read, fully understand, and agree to the terms of this informed consent, and I sign it voluntarily with the full knowledge of its significance. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

__________________________________
Legal Guardian Printed Name

__________________________________
Legal Guardian Signature  Date

Disclaimer: The sample informed consent language available here is for informational purposes only and not for the purpose of waiving liability or providing legal advice. This is sample informed consent language provided by USEF to assist trainers and coaches in meeting their obligations under USEF’s Minor Athlete Abuse Prevention Policies. You should contact an attorney to obtain advice with respect to any particular issue or problem.
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**Informed Consent for Minor Participation in Local Travel**

Under the United States Equestrian Federation’s (“USEF”) Safe Sport Policy and Minor Athlete Abuse Prevention Policies, local travel is defined as travel to training, practice, and competition that occurs locally and does not include coordinated overnight stay(s) (“Local Travel”).

I, [INSERT LEGAL GUARDIAN NAME], certify that I am the parent or legal guardian of [INSERT MINOR’S NAME] (“Minor Athlete”). I understand that my express written consent is required in order for Minor Athlete to participate in Local Travel and ride alone in a vehicle with [INSERT NAME OF UNRELATED ADULT]. I acknowledge that the Local Travel was not organized by USEF and is not affiliated with USEF in any way. I also understand that USEF’s Minor Athlete Abuse Prevention Policies prohibit Minor Athlete from participating in the Local Travel unless I provide my express written consent.

In connection with and in consideration of Minor Athlete’s participation in the Local Travel, I as Minor Athlete’s legal guardian hereby represent and consent to the following:

1) I consent and agree to allow the Minor Athlete to attend and participate in the Local Travel, in connection with [INSERT EVENT/COMPETITION NAME] and ride alone in a vehicle with [INSERT NAME OF UNRELATED ADULT];

2) I consent and agree that I have had the opportunity to review USEF’s Safe Sport Policy and Minor Athlete Abuse Prevention Policies, available at [http://safesport.usef.org/](http://safesport.usef.org/);

3) I acknowledge that USEF’s Safe Sport Policy and Minor Athlete Abuse Prevention Policies are intended to protect athletes from abuse and risks of harm in sport, and that unrelated adults are not permitted to ride in a vehicle alone with an unrelated minor athlete, absent emergency circumstances, and must have at least two minor athletes or another adult at all times, unless I provide my express written consent in advance of the Local Travel;

4) I understand that USEF recommends that I watch the Parents Guide to Misconduct in Sport, provided at no cost to me and produced by the U.S. Center for SafeSport before providing this consent, which can be found at [https://athletesafety.org/](https://athletesafety.org/);

5) I authorize and consent to the release and disclosure of this consent form, Minor Athlete’s name, Local Travel details, and other relevant information, as needed, to demonstrate my consent to Minor Athlete’s participation in the Local Travel.

I certify that I am 18 years of age or older and the legal guardian of the Minor Athlete. In addition, I certify that I have read, fully understand, and agree to the terms of this informed consent, and I sign it voluntarily with the full knowledge of its significance. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

__________________________________
Legal Guardian Printed Name

__________________________________  __________________
Legal Guardian Signature                Date
Informed Consent for Minor Participation in Massage Session

I, [INSERT LEGAL GUARDIAN NAME], certify that I am the parent or legal guardian of [INSERT MINOR’S NAME] (“Minor Athlete”). I acknowledge that the massage, rubdown, or athletic training modality (“Massage”) was not organized by the United States Equestrian Federation (“USEF”) and is not affiliated with USEF in any way. I understand that it is recommended that my express written consent is obtained in order for Minor Athlete to participate in and receive the Massage with [INSERT NAME OF PROFESSIONAL PERFORMING MASSAGE/RUBDOWN].

In connection with and in consideration of Minor Athlete’s participation in the Massage, I as Minor Athlete’s legal guardian hereby represent and consent to the following:

1) I consent and agree to allow the Minor Athlete to receive the Massage, in connection with [INSERT EVENT/COMPETITION NAME];
2) I consent and agree that I have had the opportunity to review USEF’s Safe Sport Policy and Minor Athlete Abuse Prevention Policies, available at http://safesport.usef.org;
3) I acknowledge that USEF’s Safe Sport Policy and Minor Athlete Abuse Prevention Policies are intended to protect athletes from abuse and risks of harm in sport, and that any massage/rubdown/athletic training modality performed at a facility or a training or competition venue must be (1) conducted in an open and interruptible location, and (2) done with at least one other adult present;
4) I understand that I am allowed to observe the Massage; and
5) I authorize and consent to the release and disclosure of this consent form, Minor Athlete’s name, Massage details, and other relevant information, as needed, to demonstrate my consent to Minor Athlete’s participation in the Massage.

I certify that I am 18 years of age or older and the legal guardian of the Minor Athlete. In addition, I certify that I have read, fully understand, and agree to the terms of this informed consent, and I sign it voluntarily with the full knowledge of its significance. If I am signing and submitting this Agreement electronically, I acknowledge that my electronic signature shall have the same validity, force and effect as if I affixed my signature by my own hand.

__________________________________
Legal Guardian Printed Name

__________________________________  __________________
Legal Guardian Signature                  Date

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