Bubble Football Consent Form

Personal Details

Name of child/young person:	
Date of Birth:	
Gender:	
Address:	
Mobile Tel No parent/carer:	
Email Address of parent/ carer:	
Emergency contact information:	
Name of alternative adult who can be contacted in an emergency:	
Relationship to child/young person:	
Mobile Tel No alternative adult:	

CONSENT (Please read carefully and delete where appropriate):

a) I agree for my son/ daughter to take part in bubble football.
b) I confirm to the best of my knowledge that my son/ daughter does not suffer from any illness/Injury or medical condition that could be affected during and after the session.
c) I confirm my son/daughter will be wearing the relevant sports clothing required to take part in the bubble football event.
d) I understand and explained to my son/daughter that bubble football and is classed as a contact sport and injuries could occur and accept that these risks are acceptable for my son/daughter to take part in the event.
e) I understand that bubble football is a contact sport and injuries may occur, I will not hold Nebubblefootball Ltd running the event or any other third party liable during such events under ANY circumstances.
f) I give my consent that if an emergency medical situation arises, NEbubblefootball Ltd may act as loco parentis. If the need arises for administration of first aid and/or other medical treatment which in the opinion of a qualified medical practitioner may be

necessary. I also understand that in such circumstances that all reasonable steps are made.

g) I consent that if play has to stop due to unforeseen circumstances NEbubblefootball Ltd reserve the right to end the session at their own discretion without a refund.
h) I accept and consent by signing this I waive the right to pursue any legal action against NEbubblefootball Ltd or any third party during or following the event.
i) I consent and give permission to NEbubblefootball Ltd and its third parties to use images and videos taken of the scheduled event for promotional purposes.
j) I have read and fully understood this consent form and by signing this document agree for my son/daughter to take part in bubble football and goggle football upholding the rules outlined in the safety briefing which will be given on the day of the event.
k) I understand and explained to my son/daughter that Covid-19 guidelines must be adhered to, temperature will be taken at the start of the event, hand sanitiser will be used at start and end of event as well as social distancing measures throughout

Print name parent / carer:	
Signature of parent / carer:	
Date Signed:	
Name of Event Organiser:	
Date and time of Event: **(e.g. 01.01.2026 at 12-1pm)**	

PLEASE NOTE:

Your son/daughter must bring both pages of this document fully completed on the day of the event and hand this to a staff member prior to the event taking place. Without these documents fully signed and completed your son/daughter will not be able to take part in the event and no refunds shall be given. These documents are for your child's safety and wellbeing and to protect the company running the event.

Thank you for your time and understanding, we look forward to meeting you at the scheduled event.