



# DUAL RELATIONSHIP

## Minor Consent Form

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### What is a Dual Relationship?

The U.S. Center for SafeSport defines a dual relationship as an existing relationship between an Adult Participant and Minor Athlete outside of the sport program.

The definition is intentionally broad as to cover a wide array of relationships. This could apply to, but is not limited to, siblings, teachers, coaches, friends, and/or significant others.

Dual Relationship Consent Forms are not guaranteed to be approved; USAA has sole discretion to review and approve/deny the consent, regardless of Parent/Guardian authorization if it is determined that the relationship does not meet the Dual Relationship definition.

If you have questions or are unsure if you need to sign a Dual Relationship Consent Form for your Minor Athlete. Please contact [athletesafety@usarchery.org](mailto:athletesafety@usarchery.org) and we can assist you with assessing the relationship.

### What is there is an emergency?

If there is an emergency, and your Minor Athlete requires immediate attention, transportation, etc., the one-on-one interactions policy does not need to be followed.

**Dual Relationships:** An exception applicable to certain policies when an Adult Participant has a dual role or relationship with a Minor Athlete and the Minor Athlete's parent/guardian has provided written consent at least annually authorizing the exception.

If you have questions related to the Minor Athlete Abuse Prevention Policy (MAAPP), for example, what qualifies as In-Program contact, a Dual Relationship, or a Close-in-Age exception, please review USAA's MAAPP [here](#).

**Adult Participant:** An Adult Participant is any adult (18 years of age or older) who is:

1. A member of USA Archery;
2. An employee or board member of USA Archery or a USA Archery Club or State Association;
3. Within the governance of disciplinary jurisdiction of USA Archery or a USA Archery Club or State Association;
4. Authorized, approved, or appointed by USA Archery or a USA Archery Club or State Association to have regular contact with or authority over minors.

**If you are the Parent/Guardian of the Minor Athlete, you do not need a consent form for your relationship with your Minor Athlete.**

**Parents and legal guardians are encouraged to take the U.S. Center for SafeSport's education and training on child abuse prevention before providing consent for their**

Minor Athlete to have access to training modalities, massages, and rubdowns offered by a USAA contractor who is a licensed provider or the United States Olympic and Paralympic Committee (USOPC) medical provider subject to these policies. This training is accessible through USAA's Membership Services platform. For more information, please contact [athletesafety@usarchery.org](mailto:athletesafety@usarchery.org).

## Consent

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I confirm that I, \_\_\_\_\_ (Full Name) am the parent or legal guardian of the Minor Athlete \_\_\_\_\_ (Full Name), who is a member or participant of USA Archery (USAA), and under the age of 18.

I acknowledge that I am providing consent pursuant to [USAA's Minor Athlete Abuse Prevention Policy \(MAAPP\)](#). I acknowledge that USAA's MAAPP contains provisions that are intended to prevent abuse and risks of harm. I acknowledge that I have been advised that prior to granting consent, I should complete the training entitled "Parent's Guide to Misconduct in Sport".

As the parent/guardian of the said Minor Athlete, I am advising USAA that the said Minor Athlete, under the age of 18, has a dual relationship with \_\_\_\_\_ (Adult Participant Name).

If approved, consents are as authorized as beginning on page 4.

### Relationship Details

DOB of Adult Participant: \_\_\_\_\_

Time Known: \_\_\_\_\_

Relationship: \_\_\_\_\_

Please provide a summary of relationship details:

Please be advised that the general consent forms are not available for one-on-one interactions, locker rooms, lodging-shared room (different from general lodging consent form) and electronic communications. If you would like to authorize and consent to any of these interactions for the said Minor Athlete, please continue to the next section.

**Approved by USAA**

**Denied by USAA**

Reason for Denial: \_\_\_\_\_

Name of Reviewer: \_\_\_\_\_

Signature of Reviewer: \_\_\_\_\_

Date: \_\_\_\_\_



## Other Consent Provisions

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### One-on-One Interactions

I hereby authorize and consent that, \_\_\_\_\_ (Adult Participant Name or USAA), can have In-Program one-on-one interactions where consent is allowed and not otherwise covered by this form.

**Annual Consent:** I authorize and provide consent for a period of one year from the date this form is signed. I understand that my Minor Athlete or I can withdraw consent at any time.

**Limited Consent:** I authorize and provide consent for the specific event/program, date range and location specified as follows:

Event/Program Name: \_\_\_\_\_

Date Range: \_\_\_\_\_

Location:

I understand that my Minor Athlete or I can withdraw consent at any time.

### Transportation

I hereby authorize and consent that, \_\_\_\_\_ (Adult Participant Name or USAA), can have In-Program one-on-one interactions and transport Minor Athlete where consent is allowed and not otherwise covered by this form.

**Annual Consent:** I authorize and provide consent for a period of one year from the date this form is signed. I understand that my Minor Athlete or I can withdraw consent at any time.

**Limited Consent:** I authorize and provide consent for the specific event/program, date range and location specified as follows:

Event/Program Name: \_\_\_\_\_

Date Range: \_\_\_\_\_

Location:

I understand that my Minor Athlete or I can withdraw consent at any time.

### Lodging- Shared Room

I hereby authorize and consent that, \_\_\_\_\_ (Adult Participant Name or USAA), can share a hotel room or otherwise sleep in the same room with said Minor Athlete for In-Program lodging related to USAA.

**Annual Consent:** I authorize and provide consent for a period of one year from the date this form is signed. I understand that my Minor Athlete or I can withdraw consent at any time.

**Limited Consent:** I authorize and provide consent for the specific event/program, date range and location specified as follows:

Event/Program Name: \_\_\_\_\_

Date Range: \_\_\_\_\_

Location:

I understand that my Minor Athlete or I can withdraw consent at any time.

### **Locker Rooms**

I hereby authorize and consent that, \_\_\_\_\_ (Adult Participant Name or USAA), can have In-Program one-on-one interactions in the Locker Room during USAA sport activities.

**Annual Consent:** I authorize and provide consent for a period of one year from the date this form is signed. I understand that my Minor Athlete or I can withdraw consent at any time.

**Limited Consent:** I authorize and provide consent for the specific event/program, date range and location specified as follows:

Event/Program Name: \_\_\_\_\_

Date Range: \_\_\_\_\_

Location:

I understand that my Minor Athlete or I can withdraw consent at any time.

### **Electronic Communications**

I hereby authorize and consent that, \_\_\_\_\_ (Adult Participant Name or USAA), can have one-on-one Electronic Communication with said Minor Athlete related to In-Program USAA activities.

**Annual Consent:** I authorize and provide consent for a period of one year from the date this form is signed. I understand that my Minor Athlete or I can withdraw consent at any time.

**Limited Consent:** I authorize and provide consent for the specific event/program, date range and location specified as follows:

Event/Program Name: \_\_\_\_\_

Date Range: \_\_\_\_\_

Location:

I understand that my Minor Athlete or I can withdraw consent at any time.

Printed Parent or Legal Guardian Name: \_\_\_\_\_

Parent or Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Minor Athlete Name: \_\_\_\_\_

Minor Athlete Signature: \_\_\_\_\_

Date: \_\_\_\_\_

