



MEETINGS

Minor Consent Form

What qualifies as a meeting?

Typically, this form is used for meetings with coaches, sport performance or mental health professionals. Please know that the professional conducting the meeting may also have separate consent forms for you to complete. A minor Consent form must be completed prior to the meeting.

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 yourself to have meetings with your Minor Athlete.

Meetings: All one-on-one, In-Program, individual training sessions must be observable and interruptible except if:

- An emergency exists; or
- A Dual Relationship exists; or
- The Close-in-Age Exception applies; or
- A Minor Athlete needs a Personal Care Assistant, and:

(1) the Minor Athlete's parent/guardian has provided written consent to USA Archery or LAO for the Adult Participant Personal Care Assistant to work with the Minor Athlete; and

(2) the Adult Participant Personal Care Assistant has complied with the Education & Training Policy; and

(3) the Adult Participant Personal Care Assistant has complied with USA Archery's policy.

The Adult Participant providing the individual training session must receive advance, written consent from the Minor Athlete's parent/guardian at least annually, which can be withdrawn at any time; and

Parents/guardians must be allowed to observe the meetings.

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

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.

Consent

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".

I hereby authorize and consent that, _____ (Adult Participant Name or USAA), can meet one-on-one with said Minor Athlete at a sanctioned event or a facility, which is partially or fully under USA Archery's or USA Archery Clubs or State Associations jurisdiction, to include the USOPC Sports Psychologist at the Chula Vista Elite Athlete Training Center (CVEATC). The meeting must be observable and interruptible except if the door remains unlocked, another adult is present at the facility and notified that a meeting is occurring, although the Minor Athlete's identity need not be disclosed, USA Archery, the USA Archery Clubs or State Associations, and/or CVEATC is notified that the provider will meeting with the Minor Athlete, and the provider obtains consent consistent with applicable laws and ethical standards, which can be withdrawn at any time.

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: _____