

ATHLETIC TRAINING MODALITIES, MASSAGES, AND RUBDOWNS

Minor Consent Form

Should a minor athlete need to access 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, this form will be required prior to services being rendered.

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.

All In-Program athletic training modalities, massages, or rubdowns provided for a Minor Athlete must be observable and interruptible; and meet the following additional requirements:

- Another Adult Participant must be physically present for the athletic training modality, massage, or rubdown; and
- The athlete must have a signed Minor Consent Form on file for the related service as explained in subsection (2) below; and
- Be performed with the Minor Athlete fully or partially clothed, ensuring that the breasts, buttocks, groin, or genitals are always covered; and
- Allow parents or legal guardians in the room as an observer. An exception to this requirement
 may be made when the competition or training venue limits credentialing and requires
 credentialed access.
- When possible, techniques should be used to reduce physical touch of Minor Athletes.
- Only licensed providers can administer a massage, rubdown, or athletic training modality.
- Coaches, regardless of whether they are licensed massage therapists, must not massage
 Minor Athletes.

Consent

• USAA must obtain consent at least annually from Minor Athletes' parents/guardians before providing access to any athletic training modalities, massages, or rubdowns.

• Minor Athletes or their parents or legal guardians can withdraw consent at any time.

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.

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 Form

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Minor Athle	at I,(Full Name) am the parent or legal guardian of the te(Full Name), who is a member or participant of USA AA), and under the age of 18.
Policy (MAAP prevent abu	ge that I am providing consent pursuant to <u>USAA's Minor Athlete Abuse Prevention</u> P). I acknowledge that USAA's MAAPP contains provisions that are intended to use and risks of harm. I acknowledge that I have been advised that prior to granting mould complete the training entitled "Parent's Guide to Misconduct in Sport".
modalities, m above will ap must have a clothed and t guardian mus	norize and consent that the Minor Athlete listed above can receive athletic training hassages, or rubdowns for injuries, if applicable. I understand that the guidelines as stated oply, such that all sessions must follow the one-on-one interactions policy, all sessions second Adult Participant physically present, my Minor Athlete will be fully or partially their breasts, buttocks, groin, and genitals will always be covered, and a parent or legal st be permitted to observe treatment, except for when the competition or training venue tialing and requires credentialed access.
	ual Consent: I authorize and provide consent for a period of one year from the date this is signed. I understand that my Minor Athlete or I can withdraw consent at any time.
	ited Consent: I authorize and provide consent for the specific event/program, date range location specified as follows:
Event/Progra	m Name:
Date Range:	
Location: I understand	d that my Minor Athlete or I can withdraw consent at any time.
Printed Parer	nt or Legal Guardian Name:
Parent or Leg	gal Guardian Signature:
Date:	
Printed Mino	or Athlete Name:
	e Signature:
Dato:	