



Minor Athlete Safety Plan

For Regional Elite Camps

Parent/Legal Guardian Agreement

For Minor Athletes and Parent/ Legal Guardian Only:

This agreement outlines the Minor Athlete Safety Plan that will be in place for **(Minor Athlete)** _____ during their participation in the **USA Archery Regional Elite Program** (hereafter, Regional Elite Program). This safety plan serves to outline program rules and regulations and provides contact information for the enforcement and compliance with Minor Athlete Abuse Prevention Policy (MAAPP), the U.S. Center for SafeSport (the Center) Code, and USAA policies and procedures. This document also informs all parties of how to file a report with USAA or the Center should they suspect or become aware of non-compliance with the agreement and/or USAA policies and procedures.

I, **(Minor Athlete)** _____, acknowledge that I am a participant whom is also a Minor Athlete and that I am prescribed a Minor Athlete Safety Plan for which myself, my teammates, coaches, contractors and other adults must respect and enforce during my participation in the Regional Elite Program in **(Region)** _____ for the **(Year)** _____.

The purpose of the Minor Athlete Safety Plan is to ensure the safety of myself, a participant and Minor Athlete and to ensure compliance with the USAA Minor Athlete Abuse Prevention Policy (MAAPP), the U.S. Center for SafeSport Code, and all other USAA Policies and Procedures.

The following is the safety protocols will apply to my participation in the Program:

1. I understand I should contact the below individuals if I have questions or concerns about my camp.

Program Contact

- Name: Leticia Malavasi and Guy Krueger
- Email: highperformance@usarchery.org

2. I will notify either my Program Contact or file a report immediately if I have non-interruptible and/or non-observable contact with an Adult Participant (i.e. athlete, coach, staff or other adult) that my parent/legal guardian did not expressly sign a consent form to allow me to be with.
3. I understand I am not permitted to train without direct supervision from the Regional Elite Program Coaches/Contractors for the duration of my participation in the Regional Elite Program. I understand this means I may not be able to train after hours or on weekends.

(If Applicable: Housing On-Site) I understand my Program Contact or their appointee will conduct room checks nightly at 9 P.M. with two (2) adults present, to ensure I am safely in my room. I understand I may not leave my room past bed check until it is time for breakfast and/or training the following morning.

4. I understand USA Archery's Program Contact or their appointee are responsible to ensure I do not leave the training facility using ground transportation with any adult participant that is not approved by my Parent/ Legal Guardian for the duration of my participation in the Regional Elite Program and I will collaboratively inform them of my whereabouts. I understand that I am responsible for requesting approval, in writing, from two Adult Participants in a leadership role on campus for permission to leave the campus. I understand that this request may be denied if it is not in compliance with MAAPP. I understand that my Parent/ Legal Guardian may have to sign various consent forms to allow for any outing off campus. I understand that any activity off campus is considered In-Program contact as I would not otherwise be interacting with nor have the opportunity to spend time with other participants should I not be a participant in this Regional Elite Program and as such, I understand I require the appropriate pre-authorizations to participate. I understand that this is separate from and in addition to standard transportation to and from the facility for practice.

Reporting

Options for Reporting Concerns:

- a. (Minor Athletes only) I can contact my parent/legal guardian
- b. (Minor Athletes only) I can contact the USAA Program contact
- c. I can report SafeSport concerns to USAA by emailing athletesafety@usarchery.org
- d. I can report SafeSport concerns to the U.S. Center for SafeSport directly by visiting uscenterforsafesport.org/report-a-concern or calling 833-5US-SAFE
- e. I understand there are no associated costs or fees to report and that I may report anonymously

Minor Athlete Name Printed: _____

Parent/Legal Guardian Name Printed: _____

Parent/Legal Guardian Signature: _____

Date: _____

