

**Loughborough Town Netball League**  
**Parental Consent form**



This form is to be completed for ALL players under 18 years old

Club \_\_\_\_\_

Team \_\_\_\_\_

I give permission for \_\_\_\_\_ (print name)

Age \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_\_\_

to play in the Loughborough Town Netball League (LTNL) and am aware that this is an Adult League. I accept that neither the League nor any of its players can be held responsible for any injuries that may occur.

Signed \_\_\_\_\_ Parent/Guardian

PRINT NAME \_\_\_\_\_

Mobile contact: \_\_\_\_\_

*Please note: If the player is age 14 or 15, an '[Application for Young Person to Play in Adult League](#)' form must also be completed by the Club.*

**THIS FORM TO BE RETURNED TO LTNL**  
(Must be received before playing in the League)

**Please return to:** Debbie Foldys, LTNL Registration Secretary  
Email: [ltnlregistrations@outlook.com](mailto:ltnlregistrations@outlook.com)

**A COPY OF THIS FORM TO BE RETAINED BY PARENT/GUARDIAN**

This information is held securely by LTNL and will be used by LTNL committee for the purpose of participation in Netball and is destroyed at the end of the season