

Code of Conduct for Family Member / Guardian / Carer

By signing below I agree:

- ✓ That my athlete is involved in sport for their enjoyment and not mine.
- ✓ To ensure that all relevant registration forms are complete and up-to-date.
- ✓ That the athlete's coaches are fully informed of the health needs of my athlete and informed of any changes.
- ✓ To drop off and collect my athlete at the agreed times and inform the coach if there is a change to collection arrangements.
- ✓ That my athlete is properly and adequately attired for the weather conditions for the time of year and the activity they are attending.
- ✓ To help athletes to work towards skill improvement and embrace the spirit of sport; and not force an athlete(s) to participate in any sport unwillingly.
- ✓ To encourage athletes to play by the rules of their sport and teach them that honest endeavour is as important as winning.
- ✓ To make sure that an athlete is never ridiculed, humiliated or shouted at for making a mistake at training or losing a match or an event.
- ✓ To set a good example by applauding other athletes and encouraging the athlete to have mutual respect for team mates and fellow athletes.
- ✓ Not to use foul or abusive language or harass officials, coaches or other athletes.
- ✓ To accept the official's judgement and recognise the value and importance of volunteers, coaches, and
 officials.
- ✓ To abide by all necessary policies and procedures.
- ✓ To treat all athletes, volunteers, spectators, officials and Special Olympics Ireland staff with respect. Remember everyone has their part to play and is entitled to a safe environment to do so.

Family Members / Guardians / Carers have a right to

- ✓ Know your athlete is safe.
- ✓ Be informed of problems or concerns relating to your athlete.
- ✓ Be informed if your athlete is injured.
- ✓ Have your consent sought for issues or trips regarding your athlete etc.
- ✓ Have your opinions heard in relation to relevant Special Olympics issues.

I have read Special Olympics Ireland's Code of Conduct ab	ove and agree to abide by the guidelines
Name of Club:	
Name of Athlete(s):	
Signature of family member / guardian / carer:	
Print Name:	Date://
The Club Safeguarding Officer / Chairperson ca concern regarding poor practice, health and safe	_
Club Safeguarding Officer:	
Phone:	
Chairperson:	
Phone:	

Insert
photograph of
club
safeguarding
officer