

Title:	Memorandum of Understanding Guide Notes
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This is an agreement between [Athlete Name] and [Club Name]

It details the expectations of [Club Name] and your rights as a trans or gender variant person. This is to make sure your experience is as good as possible, and to protect your rights. You can use this document to make sure you are getting what you need and it can be updated regularly to ensure it remains relevant. We will ensure you have equal access to the activities and facilities we provide and to do so we would like to discuss the following:

Names and Records

<ul style="list-style-type: none"> • Name changes • Pronouns • Updating records • Changes of name 	<ul style="list-style-type: none"> • We will call you by your name and let your coaches/relevant volunteers know, with your permission • We will make sure we use the pronoun he/him/his or she/her/hers or they/their/theirs to refer to you • We will update our records with your new name and gender marker, and will repeat if this when informed of any changes. An updated APF will be required.
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Uniforms, Clothing, Makeup, Hair and Jewelry

<ul style="list-style-type: none"> • What uniform is acceptable • Makeup, hair and jewelry • Reasonable accommodations in single- • gender organizations 	<ul style="list-style-type: none"> • You are welcome to wear the uniform which makes you most comfortable and you can decide to make this change at a time which is comfortable for you. • You will need to follow the same uniform & hair rules as that gender * • Note chosen uniform
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** With respect to gymnastics and swimming, transgender athletes should be permitted to wear whatever uniform is most comfortable for them so long as it meets the NGB requirements and covers the parts of the body which would normally need to be covered.*

Toilets & Changing Facilities

<ul style="list-style-type: none"> • What toilets are available • Changing facilities • Comfort & safety • Access to single-stall facilities if preferred 	<ul style="list-style-type: none"> • You are welcome to use the bathrooms & changing facilities of the gender you identify with. • If you prefer, and available, you can use the single stall bathrooms or the single stall accessible bathrooms. • Note location if known
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Records & Confidentiality

<ul style="list-style-type: none"> • Updating records • Deciding who needs to be informed of the trans or gender variant identity, if applicable • Deciding if and how you want to come out, if applicable • Damage control if you are outed without your consent 	<ul style="list-style-type: none"> • We will update our records throughout to reflect your new name and gender marker • We will not be telling the members about your transition, unless agreed in this document • If you are made uncomfortable by anyone outing you without your permission, we will arrange support as soon as possible • The Safeguarding Officer will contact the relevant the Regional Direct in Special Olympics Ireland to receive support and, with your permission, will assist to ensure the transgender persons need are met as best we can.
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Overnight Travel

<ul style="list-style-type: none"> • Safeguarding issues • Accommodation & facilities on overnight travel • Access to gender- segregated dorms etc • Privacy and confidentiality • Other access needs 	<ul style="list-style-type: none"> • You are welcome on any overnight travel you have been selected for and have access to the accommodation arrangements you feel most comfortable in, if possible. • If you need separate sleeping arrangements we will do our best to provide this; whilst keeping you safe. • We will only inform anyone you are comfortable with us telling. • We will discuss potential welfare concerns if the tri[s] are overseas and decide what is best for you and your safety.
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Point of Contact

<ul style="list-style-type: none"> Who is the point of contact in [Club Name] if you need help or support 	<ul style="list-style-type: none"> We will establish a point of contact and if you have any problems or feel unsafe you can contact them. The point of contact will also have support from the Special Olympics Ireland Regional Director. Not point of contact
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Parental/Guardian/Carer Involvement

<ul style="list-style-type: none"> The extent to which your parents/guardians/carers are involved, if applicable Paramountcy of the trans person Privacy and confidentiality 	<ul style="list-style-type: none"> If they already know about you being trans how much involvement would you like them to have? We will also signpost you and them to any necessary supports. We will treat what you tell us as private and confidential unless you are in immediate danger or there is a safeguarding concern.
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Any other information

<ul style="list-style-type: none"> Input anything that came up and you wish to include which wasn't included above
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I **[Trans Persons Name]** agree that this document reflects what I need and reasonably accommodates those needs

Print your name here: _____

Signed: _____ Date: ____/____/____

[Club Name]: We agree that this document is appropriate to accommodate the needs of **[Trans Persons Name]** and we will make adjustments as detailed to ensure their rights are protected and their experience is good.

Print your name here: _____ Role in club: _____

Signed: _____ Date: ____/____/____

This Memorandum of Understanding will be reviewed on **Date:** ____/____/____