The undersigned is the parent/guardian of the Minor Athlete identified below who is a member or participant of
________________________________________ (Member Club or USAG). This consent is provided pursuant to USA Gymnastics
Safe Sport Policy, and I acknowledge that it contains policies that are intended to prevent abuse and risk of harm. I
acknowledge that I have been advised that prior to granting consent, I should complete the training entitled “Parent’s

As the parent/guardian of the Minor Athlete identified below, I am advising ________________________________
(Name of Member Club or USA Gymnastics) that ________________________________, a Minor Athlete, has a Dual
Relationship with the following Adult Participant: ________________________________.

The nature of the Dual Relationship is as follows:
By my initials below, I am consenting to the Dual Relationship Exception for each area of Safe Sport Policy, for one (1)
year from the date of this Annual Consent Form. If an area does not have my initial, I do not consent to the exception
detailed in that area. I am aware that I can withdraw this consent in writing at any time.

__________ Transportation

__________ Lodging

__________ Electronic Communication

__________ Locker Room/Changing Areas

I, as the parent/guardian of the Minor Athlete identified, hereby authorize and consent that the above-named Adult
Participant, can travel one-on-one with said Minor Athlete to and from all In-Program activities related to for one (1) year
from the date of this consent.

_____________________________________________________________ _________________________________
Parent/Gaurdian Signature Date