



QUEENSLAND

Surf Life Saving Queensland

U18 Communication NON-Consent Form

I,, (details listed below) **DO NOT consent** to unauthorised direct communication with my child/ren (strike out as applicable) for the scope of use set out.

DETAILS OF PERSON COMPLETING THE FORM			
Club Name			
Mobile Number			
Email Address			
NAMES OF MEMBERS WHO DO NOT CONSENT TO UNAUTHORISED COMMUNICATION			
Name	DOB	Name	DOB

Is this for all activities/programs throughout the season/year	Yes	No
If no, please list the specific activity/program that you don't give permission for e.g. Award Training		

DECLARATION

*I **DO NOT** consent for Surf Life Saving Queensland (SLSQ) or any affiliated entity contacting my child for any internal and/or non-commercial external, training, obligation, education and/or research purpose communications and that all contact will be required to direct to me.*

*I **DO NOT** agree to any communications including but not limited to contact by way of text messages, social media app's, emails or phone communications etc.*

I acknowledge that this does not extend to the inclusion of me giving my endorsement to communicate with my child, that being a separate approval for a specific purpose, for example when attending youth camps etc.

Member Signature:

Name:

Signed:

Date:

Parent/Guardian Signature (for members Under 18):

Name:

Relationship to Youth:

Signed:

Date: