

Jamaica Anti-Doping Commission (JADCO) **Doping Control Parental Consent Form**

I _____
(Parent/Guardian)

hereby consent to my child/ward being tested by the Jamaica Anti-Doping Commission at any event, competition or other activity which is organised, held, convened, authorised or recognised by any National Federation in Jamaica or by any member or affiliate organisation of any National Federation in Jamaica including any club, association, school, team or league.

Particulars of child/ward

Name: _____
(First Name) (Middle Name) (Last Name)

Date of Birth: _____
(Day) (Month) (Year)

Sex:
 Male
 Female

Signature: _____
(Parent/Guardian)

Date: _____
(Day) (Month) (Year)