Pickleball Ireland
Underage Player Participation in Adult Tournaments

Pickleball Ireland – Safeguarding and Event Oversight

Pickleball Ireland recognises that in exceptional circumstances, players under the age of 18 may be eligible to participate in adult-level tournaments. To ensure this is done in a manner that prioritises child safeguarding, the following policy applies:

1. Eligibility and Approval

- Underage participation is by invitation or application only and must be approved by both the Tournament Director and the Pickleball Ireland Safeguarding Officer.
- Approval is contingent on the player's maturity, skill level, and welfare considerations.

2. Mandatory Parental Consent & Supervision

- A signed Parental Consent and Supervision Agreement Form must be submitted before the event (see attached form template).
- A parent or legal guardian must be present, on-site at all-times and retains full responsibility for the supervision and welfare of the underage participant throughout the tournament.

3. Code of Conduct Compliance

- The underage player and parent/guardian must agree to and uphold:

. Pickleball Ireland's Code of Conduct
. The Event Rules and Regulations
. Respect for all referees, opponents, and volunteers

4. Safeguarding Oversight

- The event will remain subject to Pickleball Ireland's Child Safeguarding Policy.
- Tournament staff and volunteers will be reminded of their obligations under relevant safeguarding Legislation and guidance in both jurisdictions (ROI: Children First Act 2015; NI: Children (NI) Order (1995).
- Any concerns arising during the event will be reported to the Designated Liaison Person (DLP) immediately.

5. Disclaimer

- Participation in an adult competition does not exempt the event or its organisers from any Safeguarding responsibilities.
- Pickleball Ireland reserves the right to refuse or revoke participation of any individual where welfare or safety cannot be reasonably ensured.

This appendix should be read in conjunction with Pickleball Ireland's Child Safeguarding Statement and Event Procedures.

Parental Consent & Supervision Agreement Form
Pickleball Ireland - Underage Participation in Adult Tournament

Section 1 – Player Details
- Full Name of Player: _____
- Date of Birth: _____
- Club (if applicable): _____
- Tournament Name: _____
- Date(s) of Event: _____
- Location: _____

Section 2 – Parent/Guardian Details
- Full Name: _____
- Relationship to Player: _____
- Mobile Number: _____
- Alternative Emergency Number:_____
- Email Address: _____

Section 3 – Consent and Supervision Agreement
I confirm that I am the parent/legal guardian of the child named above and give permission for them to participate in the adult tournament stated above.

I understand and agree to the following:
1. I give full consent for my child to participate in this adult-level tournament and confirm they are physically and emotionally capable of doing so.
2. I will remain present at the event venue and accept full responsibility for supervising my child's behaviour, welfare, and safety throughout the event.
3. I understand that Pickleball Ireland reserves the right to withdraw participation if proper supervision or conduct standards are not met.
4. I acknowledge that all safeguarding responsibilities remain in place during this event, and I am aware of how to report a concern if needed.

Medical information		
Are there any specific medical conditions requiring medical treatment?	No ☐	Yes – please give details ☐
Details of medication required (e.g. pills, inhaler)		
Are there any other medical conditions or disabilities to be aware of?	No ☐	Yes – please give details ☐
Are there any allergies to be aware of?	No ☐	Yes – please give details ☐

Section 4 – Signatures

I confirm my registration – child / young person	
Signature	×
Print name	
Today's date	

Declaration of consent – parent / carer	
Please tick the boxes below and then sign this form.	
☐	I give my consent that if an emergency medical situation arises, the organisation / club may act *in loco parentis* for administration of first aid and/or other medical treatment that in the opinion of a qualified medical practitioner may be necessary. I also understand that in such circumstances all reasonable steps will be taken.
☐	I confirm that I have read, or been made aware of, the organisation's: • codes of conduct for parents, coaches, and children • Safeguarding policy • policies on photography, videoing, texting and use of social media.
☐	I confirm that my child is aware of the **Pickleball Ireland** code of conduct for children/young people.
Signature	×

Print name	
Today’s date	