

Leaders Code of Conduct

Howth Golf Club leaders should familiarise themselves with Golf's Safeguarding Policy, in particular the code of conduct. Leaders should read and agree to abide by these terms.

As a leader in golf I agree that I should: • Be positive during sessions and competitions, praise and encourage effort as well as results • Put the welfare of young person first, strike a balance between this and winning / results • Encourage fair play and treat participants equally • Recognise developmental needs, ensuring activities are appropriate for the individual • Plan and prepare appropriately • Have experience relevant to working with juniors or hold up-to-date qualifications and be committed to the guidelines in the Safeguarding Policy • Involve parents where possible and inform parents of progress as well as when problems arise • Keep a record of attendance at training and competitions • Keep a brief record of injury(s) and action taken • Keep a brief record of problem/action/outcomes, if behavioural problems arise • Report any concerns in accordance with this Code's reporting procedures

Where possible I will avoid: • Spending excessive amounts of time with children away from others • Taking sessions alone • Taking children to my home • Taking children on journeys alone in my car

Sports Leaders should not: • Use any form of physical punishment or physical force on a child • Use any form of abusive language • Exert undue influence over a participant in order to obtain personal benefit or reward • Engage in rough physical games, sexually provocative games or allow or engage in inappropriate touching of any kind, and /or make sexually suggestive comments about, or to a child. This includes innuendo, flirting or inappropriate gestures and terms • Take measurements or engage in certain types of fitness testing without the presence of another adult • Undertake any form of therapy (hypnosis etc.) in the training of children

Communication with Parents to continue to ensure a child reaches their full potential and enjoys their time at the club officials/coaches need to encourage parents to consider; • what do they want their child to get out of golf? Is it the same as what the parent wants? • Does the parent understand what their child is trying to achieve and what support they need to achieve it? • Is the parent being the best role model they can be to help their child enjoy their golfing experience? • Is the parent focused on their child's development and enjoyment?

Emergency Action/First Aid All officials/coaches, leaders working directly with juniors should be prepared with an action plan in the event of an emergency and be aware of our First Aid Procedures. This will include: • Access to First Aid equipment • Telephone contact if the participant is a minor • Telephone contact to the Emergency Services

Self-Declaration Do you agree to abide by the guidelines contained in Golf's Safeguarding Policy? Yes [] No []
Have you ever been asked to leave a sporting organisation? Yes [] No [] (If you have answered yes, we will contact you in confidence)
Is there any reason you should not be working with young Yes [] No [] people?.
Printed name of official/coach/volunteer
Signature of official/coach/volunteer Date



Howth Golf Club

Code of Conduct for Juniors

Howth Golf Club wishes to provide the best possible environment for all juniors involved in the sport. Juniors deserve to be given enjoyable, safe sporting opportunities, free of abuse of any kind. These participants have rights, which must be respected, and responsibilities that they must accept. Juniors have responsibilities to treat other participants and Golf Leaders with fairness and respect.

Juniors are entitled to: • Be safe and to feel safe • Be listened to and believed • Have fun and enjoy golf • Have a voice in relation to their activities within golf • Be treated with dignity, sensitivity and respect • Participate on an equitable and fair manner, regardless of gender, appearance, age, ability, religion or belief, disability, social and ethnic background or political persuasion etc. • Experience competition at a level at which they feel comfortable • Make complaints and have them dealt with • Be safe from risk of bullying behaviour • Say No to things that make them feel unsafe • Privacy and Confidentiality

Juniors should always: • Give their friends a second chance • Treat Golf Leaders with respect, (including professionals, coaches, convenors, club officials, etc.) • Look out for themselves and the welfare of others • Play fairly at all times, do their best • Be organised and on time, tell someone if you are leaving a venue or competition • Respect team members, even when things go wrong • Respect opponents, be gracious in defeat • Abide by the rules set down by team managers when travelling to away events, representing the club • Behave in a manner that avoids bringing Howth Golf Club into disrepute • Talk to the Children's Officer within the club if they have any problems

Juniors should never: • Cheat • Use violence or engage in irresponsible, abusive, inappropriate or illegal behaviour • Shout or argue with officials, team mates or opponents • Harm team members, opponents or their property • Bully or use bullying tactics to isolate another player or gain advantage • Take banned substances, drink alcohol, smoke or engage inappropriate sexual behaviour • Keep secrets, that may leave them or others at risk • Tell lies about adults / juniors or spread rumours • Discriminate against other players on the basis of gender, appearance, age, ability, religion or belief, disability, social and ethnic background or political persuasion

Printed name of Junior	
Signature of Junior	
Printed name of Parent/Guardian	
Signature of Parent/Guardian	
Date	



Parental/Guardian

Consent Form Please complete this form with a parent/guardian Parental/guardian consent from Full Name of Player:
Address:
Date of Birth:
Home Telephone:
Players Mobile No (in case of emergency1):
Parent(s) Mobile(s):
Players E-Mail1:
Parents E-mail(s):
MEDICAL/BEHAVIOURAL INFORMATION
Please include all medical details that might be relevant in dealing with your child in a safe manner, such as allergies, medication, dietary, special needs, etc.
Date of last Tetanus Injection:
Doctors Name, address and contact phone number:
PARENT/GUARDIAN Section Full Name of Parent/Guardian:
Address (if different from above):

Home Telephone(if different from above):
Name and mobile number of alternative adult to be contacted in case of emergency:
These details are optional and contact will be made via the parents directly unless specific consent and reason agreed for direct communication with young people and even then, this should be done in a group communication.
Declaration I am the Parent/guardian of:
• I hereby consent to the above child participating in golf activities of the Union in line with Golf's Safeguarding Policy. • I confirm that all details are correct and I am able to give parental consent for my child to participate in and travel to all activities. • I am happy for me, and my child, to receive appropriate communication through text and email. • I understand that photographs/videos will be taken during or at golf related events and may be used in the promotion of golf, including social media. • If selected for teams, I confirm I am happy with the travel arrangements the Union may arrange for my child. • I acknowledge that the Union is not responsible for providing adult supervision for my child except for formal junior coaching, matches and competitions. • I understand and agree that my son/daughter in my care be bound by the above Code of Conduct whilst representing the Unions and I absolve all its representatives from all liability and/or claims for illness, injuries and damage that may arise directly as a result of my son/daughter breaching conditions set out in this document.
PARENT/GUARDIAN STATEMENT I will inform the coaches/designated liaison person of any important changes to my child's health, medication or needs and also of any changes to our address or phone numbers given. In the event of illness, having parental responsibility for the above named child, I give permission for medical treatment to be administered where considered necessary by a nominated first aider, or by suitably qualified medical practitioners. If I cannot be contacted and my child should require emergency hospital treatment, I authorise a qualified medical practitioner to provide emergency treatment or medication.
SIGNATURE OF PARENT/ GUARDIAN:
PRINT NAME OF PARENT/GUARDIAN:
DATE: