

**JERSEY SPARTAN ATHLETIC CLUB**

**Dear Athletes/Parents**

**HEALTH & SAFETY GUIDELINES FOR GOOD PRACTICE**

Please find enclosed a copy of the Club's Health & Safety Guidelines for Good Practice.

To ensure the safety and well-being of all members and coaches, it is important that we are all aware of how to conduct ourselves during training and competitions.

Please read carefully, sign and return the tear-off slip below to:

Richard Milner  
Membership Secretary  
Jersey Spartan Athletic Club  
Roche d'Or  
La Rue des Croix  
Trinity  
JE3 5JA

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**I HAVE READ AND UNDERSTOOD THE HEALTH & SAFETY GUIDELINES FOR GOOD PRACTICE AND AGREE TO ABIDE BY THE RECOMMENDATIONS OF THE JERSEY SPARTAN ATHLETIC CLUB COMMITTEE AT ALL TIMES.**

**\*SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**\*SIGNATURE OF PARENT OR GUARDIAN  
(if under 16 years of age)**

**DATE:** \_\_\_\_\_

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