



DUAL RELATIONSHIP EXCEPTION FORM ELECTRONIC COMMUNICATION ON SPECIFIC DATES/EVENTS

The USA Hockey Safe Sport Program Handbook adopts policies in conformance with policies of the U.S. Center for SafeSport, including the SafeSport Code for the U.S. Olympic and Paralympic Movement (“SafeSport Code”) and the Minor Athlete Abuse Prevention Policies (“MAAPP”). The USA Hockey Safe Sport Program, SafeSport Code and MAAPP require parental consent for certain activities between Adult Participants and Minor Athletes participating in USA Hockey programs. This form provides consent for an exception to the MAAPP policies on electronic communications for the Adult Participant and Minor Athlete that have a Dual Relationship, which is a relationship that exists outside of a sport relationship. Examples of dual relationships include but are not limited to family members, family friends, and teachers.

The undersigned is the parent/guardian of the Minor Athlete identified below, who is a member of [INSERT NAME OF LOCAL PROGRAM] and under the age of 18. This consent is provided pursuant to the USA Hockey Safe Sport Program and I acknowledge that the USA Hockey Safe Sport Program Handbook found at www.usahockey.com/safesportprogram contains policies that are intended to prevent abuse and risks of harm.

The following Consent form is for consent to a Dual Relationship exception to apply in a specific instance(s).¹ Additionally, consent can be withdrawn by a parent/guardian at any time.

Consent for Dual Relationship

As the parent/guardian of the Minor Athlete identified below, I am advising [INSERT NAME OF LOCAL] that [INSERT MINOR ATHLETE NAME], a Minor Athlete under the age of 18, has a Dual Relationship with the following Adult Participant: [INSERT NAME OF ADULT PARTICIPANT]. The Dual Relationship is as follows:

[_____ DESCRIBE DUAL RELATIONSHIP DETAILS _____].

With my initials below, I am consenting to the Dual Relationship Exception for the area of the USA Hockey Safe Sport Program specified on this form, for the time period(s) or event(s) noted. **If an area does not have my initial, I do not consent to the exception detailed in that area.** I am aware that I can withdraw this consent at any time.

¹ Separate forms providing consent on an annual basis may be used and are located at <https://www.usahockey.com/resourcesanddownloads>

Dual Relationship Consent for Electronic Communications– Specific Instance(s)

I, as the parent/guardian of the Minor Athlete identified, hereby authorize and consent that the above named Adult Participant, can have one-on-one Electronic Communication with said Minor Athlete for the following occasions:

Date	Event/Occasion Name	Location	Parent Initials

I, [INSERT PARENT NAME], as parent/guardian of [INSERT MINOR ATHLETE NAME], who is under the age of 18, have read the USA Hockey Safe Sport Program Handbook and acknowledge that the above written permission is valid for the dates identified above. If I am signing and submitting this consent electronically, I acknowledge that my electronic signature shall have the same validity, force, and effect as if I signed this consent by hand.

Parent/Legal Guardian Printed Name: [INSERT PARENT NAME]

Parent/Legal Guardian Signature: [INSERT ELECTRONIC SIGNATURE] Date: [BOX FOR DATE]