

TTST ACKNOWLEDGEMENT OF MAAP POLICY

[CLICK HERE FOR LINK TO MAAP POLICY](#)

I acknowledge that I have received, read, and understood the Minor Athlete Abuse Prevention Policy and/or that the Policy has been explained to me or my family. I further acknowledge and understand that agreeing to comply with the contents of this Policy is a condition of my membership with Truckee Tahoe Swim Team (USA Swimming member club).

Name: _____

Signature: _____

Date: _____

TRUCKEE TAHOE SWIM TEAM MAAP FORMS

1. Permission for a licensed massage therapist or other certified professional or health care provider to treat a minor athlete (Page 3)
2. Permission for a mental health care professional or health care provider to have one on one interaction (Page 4)
3. Permission for an unrelated adult athlete to share the same lodging with a minor athlete (Page 5)
4. Permission for an unrelated applicable adult to provide local transportation to a minor athlete (Page 6)
5. Permission for an unrelated applicable adult to travel to competition with a minor athlete (Page 7)

Truckee Tahoe Swim Team

WRITTEN PERMISSION FOR A LICENSED MASSAGE THERAPIST OR OTHER CERTIFIED PROFESSIONAL OR HEALTH CARE PROVIDER TO TREAT A MINOR ATHLETE

I, _____, legal guardian of _____, a minor athlete, give express written permission, and grant an exception to the Minor Athlete Abuse Prevention Policy for _____ (massage therapist or other certified professional) to provide a massage, rubdown and/or athletic training modality on _____ (minor athlete) on _____ (date) at _____ (location). The massage, rubdown or athletic training modality must be done with at least one other adult present in the room and must never be done with only _____ (minor athlete) and _____ (massage therapist or other certified professional) in the room. I acknowledge that I have the right to observe the massage, rubdown, or athletic training modality. I further acknowledge that this written permission is valid only for the dates and location specified herein.

Legal Guardian Signature: _____

Date: _____

Truckee Tahoe Swim Team

WRITTEN PERMISSION FOR A MENTAL HEALTH CARE PROFESSIONAL OR HEALTH CARE PROVIDER TO HAVE ONE-ON-ONE INTERACTION WITH A MINOR ATHLETE

I, _____, legal guardian of _____, a minor athlete, give express written permission, and grant an exception to the Minor Athlete Abuse Prevention Policy for _____, a mental health care professional and/or health care provider, to have a one-on-one interaction with _____ (minor athlete) in conjunction with participation in the sport of swimming on _____ (date) from _____ am/pm to _____ am/pm.

I acknowledge that this one-on-one interaction may be a closed-door meeting, provided that the door remains unlocked; another adult is present at the facility; and the other adult at the facility is advised that a closed-door meeting is occurring. I further acknowledge that this written permission is valid only for the dates and location specified herein.

Legal Guardian Signature: _____

Date: _____

Truckee Tahoe Swim Team

WRITTEN PERMISSION FOR AN UNRELATED ADULT ATHLETE TO SHARE THE SAME HOTEL, SLEEPING ARRANGEMENT OR OVERNIGHT LODGING LOCATION WITH MINOR ATHLETE

I, _____, legal guardian of _____,
a minor athlete, give express written permission, and grant an exception to the Minor Athlete Abuse Prevention Policy for _____ (minor athlete), to stay in the same hotel room of, or share a sleeping arrangement or other overnight lodging location with _____(unrelated adult athlete) at _____ (location of hotel room or other overnight lodging location) from _____ to _____ (dates of applicable rooming arrangement). I further acknowledge that this written permission is valid only for the dates and location specified herein.

Legal Guardian Signature: _____

Date: _____

Truckee Tahoe Swim Team

WRITTEN PERMISSION FOR AN UNRELATED APPLICABLE ADULT TO PROVIDE LOCAL TRANSPORTATION TO MINOR ATHLETE

I, _____, legal guardian of _____, a minor athlete, give express written permission, and grant an exception to the Minor Athlete Abuse Prevention Policy for _____, an unrelated Applicable Adult to provide local vehicle transportation to _____ (minor athlete) to _____ (destination) on _____ (date(s)) at _____ (approximate time), and further acknowledge that this written permission is valid only for the transportation on the specified date and to the specified location.

Legal Guardian Signature: _____

Date: _____

Truckee Tahoe Swim Team

WRITTEN PERMISSION FOR AN UNRELATED APPLICABLE ADULT TO TRAVEL TO COMPETITION ALONE WITH MINOR ATHLETE

I, _____, legal guardian of _____, a minor athlete, give express written permission, and grant an exception to the Minor Athlete Abuse Prevention Policy for _____ (minor athlete), to travel with _____ (Applicable Adult), to travel from _____ (point of origin) to _____ (destination) to attend the _____ (name of competition) from _____ to _____ (dates of travel to competition).

I acknowledge that _____ (minor athlete) cannot share a hotel room, sleeping arrangement or other overnight lodging location with _____ (Applicable Adult) at any time. I further acknowledge that this written permission is valid only for the dates and location specified herein.

Legal Guardian Signature: _____

Date: _____