



USA Gymnastics  
**ANNUAL CONSENT FORM**

**INDIVIDUAL TRAINING SESSIONS**

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_ (Minor Athlete),  
hereby authorize and consent for said Minor Athlete to receive In-Program individual training sessions from  
\_\_\_\_\_ for a time period of one year (1) from the date of this consent.

I understand the following are the guidelines for Individual Training Sessions:

All sessions must follow the One-on-One Interactions Policy as found in the USA Gymnastics Safe Sport Policy.  
A parent/guardian can observe the session where credentialing allows.

I can withdraw my consent for Individual Training Sessions at any time and must do so in writing with an effective date.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date