

**Communication Consent Form for Student Contact by KPV Club Staff**  
**Effective: June 27, 2025 - Expiration: July 1, 2026**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
School: \_\_\_\_\_

Dear Parent/Guardian,

In accordance with Kentucky Senate Bill 181, Kentucky Performance Volleyball is seeking your permission to allow Kentucky Performance Volleyball coaching staff, volunteers, or chaperones to contact your student when participating in Kentucky Performance Volleyball events or activities.

All communication will be conducted professionally and will utilize club approved and traceable platforms whenever possible. (Examples: team reach, group-me, team snap, or remind.) In specific situations where those platforms are not practical (e.g. time-sensitive updates, emergency instructions, or logistical changes), this form allows you to provide written consent for direct communication outside of those systems.

**Purpose of Communication**

Club or Activity Sponsors/Chaperones may contact your student for purposes such as:

- Trip itinerary or schedule changes
- Supervision check-ins
- Departure and arrival time updates
- Meeting points, meal plans, or transportation logistics
- Emergency updates or safety instructions
- General group announcements
- Occasional personal encouragement or support during exceptional circumstances. (e.g. injury, illness, mental health, family hardship.)

**Communication Methods Covered by Consent**

By signing below, you authorize the designated personnel to contact your student as described above via: Text message, Phone Calls or Voicemails, Facebook, Instagram, or Hudl.

All efforts will be made to use traceable, club-approved systems. This consent applies only to communication that is necessary and club-related or mentioned under one of the categories listed in the "Purpose of Communication" section above.

**Legal Note**

Under Kentucky Senate Bill 181, this consent applies to any electronic communication outside of club approved platforms - whether sent individually or to a group of students. Without written consent, Kentucky educators and/or all school related personnel are not allowed to communicate with your child, such communication is prohibited by law.

If individual communication occurs outside of an approved platform, Ky Senate Bill 181 requires this consent to name a specific school Employee/Volunteer. By signing this consent form you give ALL current Kentucky Performance Volleyball Coaching Staff permission to communicate with your child.

**Parent / Guardian Authorization**

Parent/Guardian Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_