

## DECLARATION OF CONSENT MINORS

**Legal guardian**

(first + last name)

(date of birth)

(street + n° )

(ZIP + country)

(point of relationship)

**Athlete(s)**

(first + last name)

(date of birth)

(first + last name)

(date of birth)

(first + last name)

(date of birth)

As a legal guardian, I hereby declare the my son/daughter may participate as an active player at the Portugal Open 2019 in May, 17th – 18th in Portimão (Portugal).

I do know that Taekwondo is a Full Contact Competition Sport, where injuries cannot be excluded.

Neither the organizer or the promoter of the event can be held responsible for any damages or injuries and therefore. I declare that there exists a valid insurance that will cover costs of possible injuries for my son/my daughter or that I will accept all costs in Connection with possible injuries or damages by myself. I have read the competition conditions in which are according to rules and regulation of the Portugal Taekwondo. I have read the outline of the championships and all of the items of this outlines are known for me. I recognize explicitly all the points of the outline.

In particular, I recognize unconditionally the liability of the organizer.

**Date**

**Place**

**Signature of legal guardian**