

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 G2 Belgian Open 2024 in March 15th – 17th in Lommel (Belgium).

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 Taekwondo Flanders. 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**