

PARTICIPATION PERMISSION (for participant's parents)

We, the father _____
Given names

Passport: series _____ number _____ issued by _____
 _____ issued on _____

the mother _____
Given names

Passport: series _____ number _____ issued by _____
 _____ issued on _____

Parents (caregivers) of the child _____
Given names of the tournament participant

allow him (her) to take part in the “**MINSK INTERNATIONAL**” Open International Tournament in Kyokushin Karate for boys, girls, young males and females, juniors and seniors in kumite and kata on May 17, 2020

We acknowledge that kyokushin karate is a full contact martial art, and that injuries or other adverse effects are possible. We are familiar with the tournament rules and are informed of the necessity of health insurance for the child.

Should our child be injured at the tournament or have injury-related adverse effects, including such due to use of technique allowed or prohibited by tournament rules, and/or while being in the building where the tournament or preparation for it is held, we would not have any claims against chief judge, judge committee, tournament organizers, coach panel and owner of the buildings where the tournament is held.

_____/ _____ / May _____, 2020
father: (signed) (Given names)

_____/ _____ /
mother: (signed) (Given names)

Coach names, by hand

Signature
