# ＠｜FULLCONTACT KARATE PRAGUE OPEN フルコンタクト空手・プラハオープン DECLARATION（under 18） 

## Written consent（declaration）to participate in the organized competition

## Competitors younger than 18 must have this declaration signed by a legal representative！

I，signed below，thus certify and agree to the start of my child at the：FULLCONTACT KARATE PRAGUE OPEN 2023 Date：09．12．2023，Location：Czech Republic，Prague， Polská street 2400／1a， 12000 Prague 2 －Vinohrady．T．J．SOKOL．

I also confirm that my child is mentally and physically able to participate in the tournament and in case of any injury I will not ask the organizers for any financial or other compensation．

I declare that I possess a current，valid medical certificate for participation in karate competitions，not older than 1 year，which confirms the good state of health of my child．I agree that all submitted images of my child，including their alterations created by any means，
as well as those created during the tournament can be used freely during and after the tournament for such alms as advertisement，promotion，video clips，TV，cable TV，training
materials and audio，image and information media and I thus resign from any financial gratification due to above．I also resign from any legal claims that I might have concerning the breach of privacy，libel or any other reasons due to production，distribution，broadcast or any public exposition of my image connected with the tournament．

## Competitor：

Name，Surname： $\qquad$

Date of birth： $\qquad$ ，
competitor＇s signature
Legal representative：
Name，Surname： $\qquad$
Date of birth： $\qquad$ ，

Date： $\qquad$

