**ATTACHMENT 1**

**Declaration of consent from the parents or legal guardians for under aged participant**

As legal parent/guardian of, …………………………………………………………………… (First name + surname)

Date of birth: .… /.… / ………

Address: ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Point of relationship: …...…..……………………………..

I hereby declare with my consent that my son/daughter, ……………………………………………… (First name + surname)

Date of birth: .… /…. / ………

Address: ..……………………………………………………………………………………...............................…………………………………………………………………………………………………………………………………………………………………………

may participate as an active player at the French Open G2 2018 in November, 16th – 18th in Paris (France).

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 which are according to rules and regulation of the F.F.T.D.A. (Fédération Française de Taekwondo et Disciplines Associées).

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

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| --- | --- | --- |
| **Place** | **Date** | **Signature of legal guardian** |