

WAIVER FORM

Event: 19th European Open Karate Championship & Kyokushin Karate European Cup, 5th – 6th November 2022, Myślenice, Poland

Name:	
Category:	
Country:	
BC or DOP:	

I, the undersigned ______, hereby declare that I am the legal representative of ______ and that I consent to his/her participation in the sports competition of the 19th European Open Karate Championship & Kyokushin Karate European Cup.

I declare that he/she takes part in the sports competition of 19th European Open Karate Championship & Kyokushin Karate European Cup at my risk and under my responsibility, and that he/she health condition allows him/her to take part in this competition and that there are no medical contraindications to his/her participation.

I assume criminal and civil liability for any damage caused by my son/ daughter during the sports competition.

I declare that I will not file any complaints or claims in court for damages as well as possible health impairment caused by any incidents during the sports competition. I accept that the organiser is not liable in any way for the actions or omissions of a participant in the competition.

I declare that I have familiarised myself with the competition rules and I fully accept the provisions contained therein.

I consent to the processing of my personal data within the meaning of the Regulation of the European Parliament and of the Council (EU) 2016/679 of 27 April 2016 and the Act of 10 May 2018 on the protection of personal data (Journal of Laws 2019 item 1781) contained in the above statement and to the use of my image by Myślenicka Akademia Karate "Byakko", ul. Konstantego Ildefonsa Gałczyńskiego 16, 32-400 Myślenice, for the purpose of promoting and disseminating sport and physical culture, including the publication of results, photos and reports of competitions in the press, on websites and in professional guides.

Signature:	

Date: _____