

PARENT/GUARDIAN CONSENT FORM FOR MINOR PARTICIPATION IN THE TOURNAMENT

Event Name: IKO Bushido Cup 2025

Date of the Event: 20.09.2025

Location of the Event: Międzyrzec Podlaski

I, the undersigned:

Full name of parent/legal guardian:

Address:

Contact phone number:

hereby give my consent for my child:

Full name of the participant:

Date of birth:

Sports club:

to participate in the **IKO Bushido Cup 2025**, taking place on the date and at the location mentioned above.

I declare that my child is in good health and has no medical conditions that would prevent them from participating in sports competitions. I take full responsibility for my child's participation in the event.

Furthermore, I consent to the processing of my child's personal data for purposes necessary to organize the tournament, in accordance with the General Data Protection Regulation (GDPR – Regulation (EU) 2016/679), and I grant permission for my child's image to be used in promotional materials and event coverage (photos, videos, results, etc.).

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Signature of parent/legal guardian

Date:
