Consent of a parent or legal representative to the participation of a minor in the competition

1) I,			(name	e, surname and c	late of birth of	f legal representative), the lega
representative	(parent,	foster	parent,	guardian -	underline	as necessary) o e of birth) (hereinafter - Athlete
fully and willingly	agree to At	hlete's part			or minor, date	of birtily (herematter - Athlete
2) 1				District Head		
2) I,			WE	birth data _		certify with m
						net of Ministers, participation in
					equires a perm	ission from general practitioner
or a medical prac	ctitioner fron	n the State	Sports Medi	icine Agency.		
3) I certify that r	ny son/daug	hter			personal co	de
has the necessar	y permission	. I am infor	med that if	my son (daughte	r) participates	in the Competition without sucl
permission, I wil	not have ar	y right to r	aise any kin	d of claims again	st the organize	ers of the Competition in case o
potential health	problems of	my son (da	ughter).			
4) I am independ	lently respor	nsible for p	ersonal belc	ongings and belor	ngings of my so	on/daughter left at the venue o
the competition	, and in cas	e of loss,	I will not h	ave the right to	claim compe	nsation from the Competition'
organizers.						
E) If nanassame I	am raadu ta	usa tha fire	t modical ai	d that will be pro	vidad by the a	rganizare
5) If necessary, I	ani ready to	use the ms	t medical air	u that will be pro	vided by the o	rganizers.
6) I certify that I	and my child	are familia	r with the ru	ules of the compe	etition.	
7) I agree that m	y and/or my	child's perf	ormance of	the exercise will	be filmed and i	may be reflected on social media
with the aim of p	oromoting a	healthy life	estyle and, t	he organizer. I w	aive any possil	ble compensation resulting fron
the publication of	f said mater	als.				
8) I certify that	mv decision	to have m	v child part	icipate in the Co	mpetition was	s made voluntarily and with ful
authority, taking						
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Riga,/_ / 202	4.					
				_		
(Signature, name	and surnam	e of the leg	gal represen	tative)		