



PARENT OR LEGAL REPRESENTATIVE APPROVAL FOR COMPETITION

.....
organized in.....on.....

I,(first name and last name),

Date of birth:,

Address:,

Telephone number:(in case of contacting parents)

AGREE

With participating of my daughter / son.....
(first name and last name of the child),

Date of birth:,

Address

at above-mentioned competition, organised by SLOVAK ASSOCIATION AIR POWER ATHLETICS, shortly just SAAPA, (in text used SAAPA), with it ´s establishment address: Halalovka 34, Trenčín 91108, Slovak republic.

I confirm with my signature, that participation of my daughter / son at this competition is at own liability and that her / his health condition allows participation on this competition without any limitations. I agree, that organisation SAAPA is not responsible for any eventual health or assets damages. I have read and understood the competition rules and I ensure, that my daughter / son will act according to them. I accept that eventually breaking rules or disturbing of the competition continuance can lead to the disqualification of my daughter / son of this competition.

I agree with handling of my personal data mentioned in this document, application form and related documents for purposes of realisation of this competition. I also agree with illimitable using of photos and videos made during the final of this competition for the purpose of propagation of pole dance, pole sport, art, inclusive their publishing or selling to the 3.

I was adviced, that this approval is accord of own and it can be called back anytime.

In, on

(first name and last name, signature of the legal representative)