

METEORA WRESTLING ACADEMY

Trikala Greece

INTERNATIONAL WRESTLING TOURNAMENT
2-3 July 2022

INTERNATIONAL MODEL CAMP
4-8 July 2022

PARENTAL OR GUARDIAN CONSENT FORM

LAST NAME	
FIRST NAME	
FATHERS'S NAME	
ID/ PASSPORT NUMBER	
RESIDENCE ADRESS	
PHONE NUMBER	
ATHLETE'S NAME AND SURNAME	
SPORTS CLUB	
COACH OR ESCORT ACCOMPANYING THE ATHLETE	

Upon sighing this declaration as a parent or guardian, I hereby confirm that I have read and fully accept the terms and conditions of the notice of invitation for the event Meteora Wrestling Academy (InternationalTournament: 2nd –3rd July 2022 & International Model Camp: 4th – 8th July 2022). I allow my underage child to participate in the above mentioned event under his/ her coach responsibility and guidance. I declare that his/ her health statue does not prevent him/her from the participation in the event and agree to release the Organization from liability for any and all claims, demands, actions and costs that might arise out of my participating.

DATE :

SIGNATURE :