

## CHEER OPEN CRETA CUP & EUROPEAN CHEER LEAGUE

## 3-5 MARCH 2023 HERAKLION, CRETE, GREECE

## **CONSENT FORM FOR PARTICIPANTS UNDER THE AGE OF 18**

FEDERATION _	<b>_</b>	
CLUB _		
PARENTAL CONSENT FORM		
I, the undersigned, declare that I authorize my minor child to attend and participate in the CHEER OPEN CRETA CUP 2023		
the necessary cardiologic check up, to participate in athletic events, is in	that my minor child has undergone all the essential medical exams, has received from a pediatrician or cardiologist in charge and has been given the permission good health and doesn't suffer from a condition that might affect the child's ability ely affect the child's condition by taking part in the events.	
coaches, supervisors and represent especially in the event of injury or a the designated sport and the activitie the name / image of myself and my	d harmless the Hellenic Cheerleading Federation and its officers, the sponsors, atives for any damage that may be suffered by my child, however caused, and my other accident that my child may suffer in the normal course of participation in es incidental thereto. Moreover, I give the right and permission for the free use of minor child from the Mass Media to the Hellenic Cheerleading Federation and the as well as for the notification of the athletic authorities in charge.	
I hereby declare that I have read, und	derstood and agreed to the participation rules and to the information above.	
MEDICAL HISTORY: THERE IS A H	EALTH CONDITION e.g. (DIABETES, ANEMIA, EPILEPSY) YESNO	
PHARMACEUTICAL TREATMENT	BEING RECEIVED:	
Further useful information:		
THERE WILL BE MEDICAL SUPER	VISION DURING THE EVENT	
FULL NAME OF PARTICIPANT (in ca	apital letters)	
IDENTIFICATION OF DASSPORT N	UMBER OF PARENT OR LEGAL GUARDIAN	
DATE	MOBILE PHONE	
FULL NAME & SIGNATURE OF PAR	ENT OR LEGAL GUARDIAN	



**Website:** cheerleading.gr **E-mail:** info@helleniccheerleadingfederation.gr

