



PARENT CONSENT

I am the undersigned.....

1. Due to the difficulty of the event and the injury I may encounter, etc. I am aware of personal risks,
2. My child has sufficient training and experience to participate in the event,
3. During the event:
 - The organization cannot be held responsible for any material or moral damages or accidents I may be exposed to,
 - I will comply with the decisions made by the health teams and the organization,
 - I will respect the environment and not destroy the natural environment,
 - I accept, declare and waive that the photographs and videos taken during the organization can be used by the organization and all institutions and organizations supporting the organization in all written, visual and digital media.
4. I give permission for my child, whose information is given below, to participate in the 46th International Trabzon Half Marathon Children - Public Race.
5. I know and accept all information and content about the Race / Event.
6. I, as the parent, assume all responsibility for my child, whose information is written below, during the race/event.
7. I declare and declare that my child, whose information is written below, does not have any medical condition to participate in the race / event.

WILL PARTICIPATE IN THE COMPETITION

Date

Child Name and Surname:

Child Birth Date:

Name and surname of the parent giving permission:

Parent Giving Signature:

Person and phone number you want to be reached in case of emergency:

PLEASE NOTE

This document must be filled out and signed by all runners who will take part in all categories, ages 7-17, under 18 years of age. Children and young runners who do not have parental consent will not be able to participate in the event.