

Parental authorization for minors to participate at Tui Shou tournaments

(Letter has to be shown at weighting / accrediting, without this letter in original signed starting is prohibited!)

Participating Tui Shou – Tournaments in 2016

I subscribed authorize my child

Name, First Name: Address: born: telephone: hints:

_____ (Medical / illness or similar)
to participate at Tui Shou tournaments in 2016. I authorize any medical care needed because
of the event concerning my child:

If necessary my child may start in a higher weight class.

A special medical examination by a doctor is strictly recommended by the organization of the tournament.

Name, First Name of parent legal – guardian:

Exact Address:

_____, _____, _____
Place, Date Signature (Parents)