**International Shinkyokushinkai Karate Championship**

**“Andrei Yakutov 33th Memorial”**

**26-29.09.2025, NOVOSIBIRSK**

**LIABILITY DECLARATION**

(for minor aged athletes)

My name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I live in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am the parent / legal guardian of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth (competitor): \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_

I declare that I know Kyokushinkai is full contact kind of sport and I accept the participation of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the International Shinkyokushinkai Karate Championship “Andrei Yakutov 33th Memorial” on the 26th - 29th of September 2025 and that I accept all parts of the official invitation of this tournament. For physical reasons nothing speaks against a participation of the aforementioned athlete and I understand that all competitors are considered to participate at their own risk. The Russian social organization “Russian Kyokushin karate Federation”, the Regional Social Kids Organization “Novosibirsk region Shinkyokushinkai Karate Federation”, Regional Social Organization “Novosibirsk region Kyokusinkai Association” and the Organizing Committee assume no responsibility for any damages, injuries or losses. All athletes must bring their own documents and the forms or any medical insurance in Russia together with medical proof undersigned by doctor given the permission for athlete to participate in the International Shinkyokushinkai Karate Championship “Andrei Yakutov 33th Memorial” on the 26th - 29th of September 2025.

Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of the parents / legal guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of legal guardian of athlete I confirm\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

signature of coach date