



## EUROPEAN BRIDGE LEAGUE

### PARENTAL CONSENT FORM For PARTICIPANTS UNDER 18 YEARS OF AGE

I/We the undersigned: \_\_\_\_\_

Authorise my/our child: \_\_\_\_\_

Born on: \_\_\_\_\_

To leave the country / territory to participate in the European National Youth Teams  
Championship in Oslofjord, Stokke, Norway, in July 2019

During this period, my/our contact details are:

Phone number: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Responsible person during the championship: \_\_\_\_\_

Mobile: \_\_\_\_\_

(This person is responsible for the good behaviour of the child during and on the way to  
and from the championship).

In case of misconduct, which will be determined by the EBL at its absolute discretion,  
the EBL has the right to withdraw the child from the competition and send him/her back  
home without any warning.

In addition to all the regulations applicable to the child as a consequence of his/her  
registration for the championship and his/her NBO membership, in particular the  
provisions of the Disciplinary Code and the sanctions set forth therein, the undersigned  
herewith accept(s) that the child must at all times behave impeccably inside and outside  
the playing area.



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Please note that consumption of alcohol, tobacco or drugs, or engaging in any kind of misconduct is strictly forbidden, e.g. having a non-respectful or aggressive attitude, causing trouble or damage, taking part in any violent action, etc.

The parent(s) authorise the responsible person to take all actions (medical treatment, hospitalisation, surgery) made necessary by the state of health of the child.

The parent(s) accept(s) being held liable for any misconduct and damage caused by their child.

The EBL accepts no liability for injuries or medical problems suffered by participants in the Championships.

Signature of the parent(s): \_\_\_\_\_

\_\_\_\_\_

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

Signature of the child : \_\_\_\_\_

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

Signature of the responsible person : \_\_\_\_\_

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