

# Event Participation Consent Form

Thank you for your interest in participating in our event. Please complete this consent form and submit it prior to the event date.

## Participant Information

Full Name:

Date of Birth:

Address:

Contact Number:

Email:

## Event Details

Event Name:

Event Date:

## Consent and Waiver

I, the undersigned, agree to participate in the above-mentioned event. I understand that my participation is voluntary and that all reasonable precautions will be taken by organizers to ensure my safety. I agree to adhere to the rules and regulations set by the event organizers.

I have read and understood the above declaration.

Participant Signature:

Date:

## Parental/Guardian Consent (For Participants Under 18)

If the participant is under 18 years of age, a parent or legal guardian must complete this section.

Parent/Guardian Name:

Contact Number:

Email (optional):

I, the undersigned, am the parent/legal guardian of the above-named participant. I hereby give permission for my child/ward to participate in

the stated event. I acknowledge that I am responsible for ensuring my child understands the event rules and safety guidelines.

I have read and agree to the above consent.

Signature of Parent/Guardian:

Date:

**Submit**