

Parental Consent Form for Minor Participation

Event Name: Global K-pop Competition Paris 2025

Event Date: Saturday 18th Oct 2025

Event Time: 08:00 – 19:00

Event Location: Clichy Hall | 6 Rue Paul Dupont, 92110 Clichy

I, the undersigned:

Parent/Legal Guardian's Full Name: _____

Relationship to Minor: _____

Phone Number: _____

Email Address: _____

Hereby give my full consent for my child:

Minor's Full Name: _____

Date of Birth: _____

Passport or ID Number (if applicable): _____

to participate in the **K-Pop Dance Competition & Full-Day Event** organized in France on the above-mentioned date and time.

Authorization

I understand and acknowledge that:

- My child will be under supervision during the event.
 - I authorize the event organizers to act on my behalf in case of any emergency, including seeking medical treatment if necessary.
 - I release the event organizers from any liability in case of accidents, loss, or damage unless due to proven negligence.
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Medical Information (Optional but Recommended)

Does your child have any medical conditions, allergies, or medications?

No

Yes – Please specify: _____

Signature

Parent/Legal Guardian's Signature: _____

Date: _____