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Name(s) \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

Country \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Consent

I am the parent or guardian of the minor named above and have the legal authority to execute the above release. I approve and waive any rights in this release.

\_\_\_\_\_  
Parent/Guardian Signature (if under 18)