



LIABILITY STATEMENT (PARENT/ TUTOR)

PERSONAL DATA (PARENT/ TUTOR)

FULL NAME:
IDENTITY CARD/ PASSPORT NUMBER:.....
DATE OF BIRTH:
SEX:
TELEPHONE:
E-MAIL ADDRESS:

PERSONAL DATA (MINOR)

FULL NAME:
IDENTITY CARD/ PASSPORT NUMBER:.....
DATE OF BIRTH:
SEX:
TELEPHONE:
E-MAIL ADDRESS:

**Personal data provided in the declaration is used solely to confirm your identity as an event participant and to enable you to collect your participation kit. These data are not used for any other purpose and are not transferred to third parties. The declaration is kept until the end of the current year, after which it is destroyed.*

I, (FULL NAME).....IDENTITY CARD NUMBER.....as parent/tutor of the minor child.....(name of child/minor), declare that I am aware of and consent to the entry of my child/minor, named above, in the TRANSFĂGĂRĂȘAN CHALLENGE competition, from 04.07.2025, according to the Rules, the participant's booklet and this declaration.

I hereby declare that I fully understand the risks of practicing cycling, including severe injuries, with possible serious effects on the health or life of my child / minor. I also hereby declare that I understand the risks to which my child/minor is subject, from the following perspectives:

- **Equipment** (bike, watch, jerry can, t-shirt, phone, etc): loss, theft, destruction, wear and tear, etc;
- **Health** (accidents that may occur before, during, or after the event): injuries, fractures, heart attack, stroke, exhaustion, anaphylactic shock, etc;
- **Weather** (weather extremes): rain, heatwave, storm, hail, etc;
- **Terrain** (dangerous areas on the route): unevenness of the route, sudden changes of direction, etc.;
- **Meeting other participants in the traffic:** cars, ATVs, motorcycles, animals, ambulances, fire engines and police cars on the road, etc.
- **Other:** accidents caused by other competitors, etc

I agree to these conditions and, in the event that my child/ minor under my guardianship is involved in an accident during the event, I will assume full responsibility for the incident and will not claim any damages from the organizer.

I assume responsibility for the health of my child/the minor I represent throughout the participation in the event. I confirm that I have taken cognizance of the need for my child/minor to undergo a medical check-up before taking part in the competition to certify that he/she is fit for physical exertion, the risk of not doing so being entirely my responsibility.

I have informed my child/ the minor I represent that, in case he/she does not show up at the event or abandons on the way, he/she must immediately notify the organizers by SMS to the emergency numbers indicated on the competition number.

I also assure the organizers that the minor under my / my child's guardianship will be receptive to any advice from the organizers throughout the event and will obey their decisions when they are in the general interest.

I also specify that I will not hold the organizers of the competition responsible in case my child / the minor I represent will be disqualified from the competition for not respecting the competition rules

I declare on my own responsibility the following:

- The data provided above is correct;
- My child/minor I represent is medically fit to participate in this event;
- My child / the child I represent has the physical, mental and technical preparation to participate in this event;
- I am aware of the legal implications of participating in this event and assume full responsibility in the event that my child/minor that I represent is involved in an accident.

By signing this declaration, I confirm that I have read, acknowledged and understood all the provisions, rules and information in the competition rules and brochure.

Signature parent/tutor:

Date: