**DECLARATION OF CONSENT**

The undersigned parent/guardian hereby agrees to the teamleader taking a swimmer
under the age of 18 abroad in connection with a swimming training camp for Silkeborg

Svømmeklub.

The questions below must be answered in capital letters.

STUDENT/CHILD

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Date of birth: |  |
| Address: |  |
| Nationality: | DENMARK | Passport number: |  |
| Travel destination: | Ilıca, Xanthe Resort, 07600 Manavgat/Antalya, Tyrkiet |
| Date of departure: | 12-02-2020 | Date of return: | 19-02-2020 |

ACCOMPANYING ADULT

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | MARTIN VENØ JENSEN | Relation: | TEAMLEADER |
| Address: | TINGVEJEN 64, 8600 SILKEBORG |
| Nationality: | DENMARK | Passport number: |  |
| Contact person during stay: | MARTIN VENØ JENSEN |

PARENT/GUARDIAN (1)

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Nationality: |  | Telephone: |  |

DATE AND SIGNATURE PARENT/GUARDIAN (1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT/GUARDIAN (2)

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Nationality: |  | Telephone: |  |

DATE AND SIGNATURE PARENT/GUARDIAN (2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_