

Consent Form for Parent or Legal Guardian

Imabari City × Panama City

50th Anniversary of the Sister City Partnership

Commemorative Logo Design Contest

Applicants under 18 years of age are required to submit this consent form.

I hereby confirm that I have reviewed the **Application Guidelines** and agree to the applicant named below participating in this contest.

1. Applicant

Full Name:

2. Parent or Legal Guardian

Full Name:

Relationship to Applicant:

Address:

Telephone Number:

Email Address:

3. Consent

I hereby agree to the following:

- The above-named applicant may participate in this contest.
- I have reviewed and agree that the applicant will comply with the eligibility requirements, technical requirements, entry restrictions, and other conditions specified in the Application Guidelines.
- If the applicant's work is selected, I agree that the two cities and related organizations may use the logo in accordance with the purposes of use specified in the Application Guidelines.
- I confirm that the submitted work does not infringe upon the copyrights, trademark rights, or other rights of any third party.

I hereby agree to the above.

Date of Consent:

Year ____ / Month ____ / Day ____

Signature of Parent or Legal Guardian:
