Declaration of honour

Name:	
Surname:	
Date of birth:	
Address:	
WAZA GI AND NO GI, held on 09-7 - I agree with fights under the JJIF is responsibility for any consequences - I'm aware of my health condition at there are no circumstances which is above mentioned tournament, and will not be a subject of claim for final	rules and I personally and I take full
 Date	Signature