

Participant's / Child'sName: _____ Date of Birth : _____

Home Address of participant/child :_____

_____City_____

Parent/Guardian 1 Mobile Number_____

Parent/Guardian 2 Mobile Numberċ_____

I (Parent/Guardian) _____, grant permission for my child, (child's name) _____ to attend the Junior Eurovision Song Contest being held at MFCC on Saturday 24th of October 2026.

Signature _____ Date _____

Mobile Number_____

If the Participant/Child is on any type of medications or has any allergies please list them below: