TEST WAIVER

FIRST NAME	first
LAST NAME	one
COUNTRY	Bulgaria
Birthdate	1.2.1926 г.
Mobile phone number	+359234234234
Email	firstone@mailinator.com
ID	234234234
Gender	Female
Send email check	X
Marketing Photos Agreed check	X
Federation Membership check	
Marketing Photos Agreed check	X
Medical Condition Checkbox	
Medical Condition Text Field	sdfa
Learned From Text Field	opa
Emergency Contact	test
Emergency Contact Phone	+359234234234234
SupervisorFirstName	
SupervisorLastName	"
SupervisorEmail	
SupervisorBirthdate	
ChildName1	

ChildLastName1	
ChildBirthdate1	
ChildBirthPlace1	
ChildGender1	
ChildPIN1	
ChildName2	
ChildLastName2	
ChildBirthdate2	
ChildBirthPlace2	
ChildGender2	
ChildPIN2	
ChildName3	
ChildLastName3	
ChildBirthdate3	
ChildBirthPlace3	
ChildGender3	
ChildPIN3	
Pickup firstname	
Pickup lastname	
Pickup email	
Pickup phone	
Pickup pin	##ChildPickUpPIN##

Date: 2.12.2025 г. Declarant: