



TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

www.tdlr.texas.gov

PARENT/GUARDIAN CONSENT FORM

YOUR LICENSE WILL NOT COMPLETED UNTIL ALL APPLICABLE FORMS ARE SUBMITTED AND APPROVED.

If you have any questions regarding the application, please email: combative.sports@tdlr.texas.gov

I _____ PARENT or LEGAL GUARDIAN OF
_____, BORN ON THE _____ DAY OF
_____, 20_____ DO HEREBY GIVE MY CONSENT AND
AUTHORIZATION TO PARTICIPATE AS A COMBATIVE SPORT CONTESTANT.

I UNDERSTAND THE NATURE OF THE COMBATIVE SPORTS EVENT AND DUE TO MY
CHILD LEGALLY BEING OF A MINOR AGE, MY SIGNATURE SERVES AS A RELEASE
TO PERMIT MY CHILD TO PARTICIPATE AS A COMBATIVE SPORT CONTESTANT.

Parent/Guardian Signature

Date

Phone Number

Sworn and subscribed to before me this _____ day of _____ 20_____.

Notary Signature
Notary Public, State of Texas

My Commission expires:
