



**41<sup>st</sup> Balkan  
Mathematical  
Olympiad**  
April 27 – May 2, 2024  
VARNA, BULGARIA

# Participation Form

Given name:

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Family name:

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Date of birth (dd-mm-yyyy):

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Delegation:

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With your signature you confirm the following:

- You fulfill the participation conditions outlined on BMO 2024 web site (only for contestants).
- During the event, the organizers take photos and videos. These are published online and/or used in printed material. Some may be labeled with your name. The organizers reserve the right to allow third parties (such as the media) to take pictures and film recordings, and/or use photos and videos made by the organizers.
- After the event, a ranking of the competition including the names, scores and awards of all participants will be published. The ranking will include your uploaded picture.
- You are responsible for ensuring adequate insurance coverage (e.g. health, accident, and liability insurance). Please note that your health insurance may not include international coverage by default. The organizers do not accept any liability.

If you do not consent to any of the above, state below what you do not consent to:

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Place, date:

Signature of the participant:

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For underage participants the confirmation of a parent or legal guardian is required:

Place, date:

Signature of parent or legal guardian:

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