



Pass'Portes Pédestre / Walking Tour 2019

Parental authorization

I (*name and first name*).....

in the capacity of legal representative father, mother, legal guardian* of the minor child (*name and first name of participating minor*)

.....hereby authorise him/her to participate in the **Pass'Portes Pédestre/Walking Tour** on Friday 28th, Saturday 29th or Sunday 30th June 2019*.

I also allow the minor to get into both French and Swiss territories.

I discharge the organiser of any responsibility in the event of an accident and/or theft or damage to their equipment; I have read and accepted the event's terms and conditions.

**Cross out where applicable.*

...../...../ **2019**

SIGNATURE:

Please send the parental authorization before 24th June 2019:

-Scanned by e-mail: inscription-pedestre@portesdusoleil.com

-Or by fax: 0033 4 50 73 33 85

-Or by mail:

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