

ePass'Portes du Soleil MTB 2017 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 **ePass'Portes du Soleil MTB 2017** on Friday 23rd June, or Saturday 24th June or
Sunday 25th June 2017*.

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.

I also complete the "authorization to leave the territory" (*new regulation since 15th January 2017*) for a
minor child living in France; needed in case you ride through Switzerland. Information to read, and
authorization to download here: <https://www.service-public.fr/particuliers/vosdroits/F1359> then to put in
the bag of your child.

**Cross out where applicable.*

...../...../ **2017**

SIGNATURE:

Please send the parental authorization before 22nd June 2017:

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

- Or by fax: 0033 4 50 73 33 85

- Or by mail:

AIERM Portes du Soleil
Pass'Portes du Soleil MTB
1401, route de Vannes
F-74390 CHATEL