

Authorization for participant under the age

Sm./Mrs. (name and su	ırname):		
Residing in:			
Date of birth:			
Number ID/passport:			
Mobile phone:			
In the capacity of:	Father 🔲	Mother	Legal guardian
Of the child (name and surname):			
Date of birth:			
Expresses the knowledge of the inscription of the child indicated above and authorizes his/her participation in the eDreams Mitja Marató Barcelona by Brooks 2024 voluntarily and under your responsibility.			
Signature father, mother, legal guardian:			

It is essential to send this completed document to the email: info@edreamsmitjabarcelona.com, accompanied by a photocopy of the identification card or passport of the minor as well as a photocopy of the identification card or passport of the authorized adult.

The organization reserves the right to cancel the registration of the minor if it does not have the requested documentation in its possession.