MAJOR

WILDSTRUBEL CRANS MONTANA

BY UTMB®

PARENTAL CONSENT FORM

I, Mr./Ms. : ……

Resident of ……

Acting as ◯ Father ◯ Mother ◯ Legal guardian

Hereby authorize my minor son/daughter:

NAME : …… SURNAME : ……

Date of birth : ……/……/…… Place of birth :……

To participate in the ……

to be held on ……/……/…… , in……

City : ……..

Date : ……/……/……

Signature of a parent or a guardian :

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Siret : 452 633 365 00039 - Intracom : FR 17 452 633 365