



Parental consent

EuroNordicWalk Vercors 2020

I, the undersigned, Mrs., Mr. (First Name and Family Name)

Living (complete postal adress) :

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Acting as the : Father Mother Guardian

Authorise (First Name and Family Name) :

Birth Date :/...../.....

Living (complete postal adress) :

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To take part

- to the NordicWalking by Night of EuroNordicWalk Vercors on Friday, 18th of September 2020
- to the Timed NordicWalking of EuroNordicWalk Vercors on Saturday, 19th of September 2020
- to the Nordic Walking Hikes of EuroNordicWalk Vercors on Saturday, 19th of September 2020
- to one of the Nordic Walking Hikes of EuroNordicWalk Vercors on Sunday, 20th of September 2020

I certify on the honor that I have the authority on this kid.

Date and signature of the parent preceded by the mention « Read and approved »