|  |
| --- |
| I, undersigned (Parent / Guardian Full name) |
|  |
| Adress:  |
| Telephone |
| Email  |
| Hereby declare to be responsible for |
| Name (Sailor) |
| Date of birth |
| Class |
| Sail Number |
| Country |

**PARENT/GUARDIAN CONSENT AND DECLARATION FORM**

Within the context of his/her participation in the **71 TROFEO CIUTAT DE PALMA** to be held in Palma de Mallorca from 3rd to 7th December 2022 organised by Real Club Nautico de Palma.

I authorise the organisers of the event to make any medical or hospital arrangements for him/her in case of emergency, including his/her transport to hospital.

Moreover, I declare that .................................................................is holder of an individual casualty policy.

**IMAGES**

I consent to my child: - being photographed, - being filmed for a video or the TV, - being interviewed by the press: I allow the Organization Committee to broadcast, via the website, all the information useful for the promotion of the regatta, including the name, and to broadcast all the pictures taken during the competition and linked to it.

Signed in (Place) ........................................ on (Date).....................................................