



10K DONOSTIA SAN SEBASTIÁN

Authorization for under-age participants

Mr/Miss (name and surname):

Address:

Birthdate:

ID card

Cell phone:

As: ☐ Father ☐ Mother ☐ Legal tutor of the

minor (name and surname):

Birthdate:

Declares that he/she is aware of the registration of the above mentioned minor and authorizes his/her participation in the indicated distance, voluntarily and under his/her own responsibility

Signature of the father, mother or legal tutor:

It is essential to send this document completed to:

info@zurichmaratonsansebastian.com , together with a copy of the ID card of the minor and a copy of the ID card of the authorised adult.

The organisation reserves the right to cancel the minor's registration if he/she does not have the requested documentation