

AUTHORIZATION FOR THE PARTICIPATION OF MINORS.

Authorization for Participation in EPIC GRAN CANARIA

In conjunction with the upcoming EPIC GRAN CANARIA event, we kindly request that parents or guardians provide their authorization for participation.

I, Mr./Mrs. _____, holding ID _____, residing at _____, and reachable at [Telephone Number _____], hereby authorize _____, holding ID [Participant's ID] _____, to participate in EPIC GRAN CANARIA in the following categories:

- EPIC GRAN CANARIA JUNIORS (Ages 14-16) – Cadete or Junior in the Canarian Federation
- EPIC GC I – 2 ETAPAS (Age 17)

This authorization is granted at [Location] on the date _____ of February 202_.

Signature of Parent/Guardian:

[Father/Mother/Guardian]

