ESPORTEC
OUTDOOR SPORT

ESPORTEC ESQUÍ CAMP PARTICIPATION AUTHORIZATION

Mr./Ms. _____, holder of ID card / NIE _____, acting as the father / mother / legal guardian of the minor _____, holder of ID card / NIE _____,

AUTHORIZES ESPORTEC to take responsibility for the minor during the Ski Camp, which will take place from **2 to 5 January 2027 in Port del Comte**, including all activities, transfers and other actions scheduled during the stay.

EMERGENCY CONTACT

Full name: _____

Relationship to the minor: _____

Contact telephone number: _____

Alternative telephone number: _____

In the event of an emergency, and if **it is not possible to contact the parents or legal guardians** using the telephone numbers provided, the undersigned **authorizes ESPORTEC to make any decisions and take any measures it considers most appropriate to protect the minor's health and safety,** including requesting medical assistance and arranging transport to a healthcare facility, without the need to obtain prior authorization.

The undersigned declares that the information provided is correct and that **ESPORTEC has been informed of any medical conditions or other relevant information** that may affect the minor's participation in the activities.

Place and date: _____

Signature of father/mother/legal guardian: