



EAR Valle del Ambroz
para Jóvenes Pianistas

**ENSEMBLE
CULTURAL**

AUTHORIZATION FOR MINORS

ACCEPTANCE OF PARTICIPATION CONDITIONS, INFORMATION OBLIGATION,
AND INFORMED CONSENT FOR PARTICIPATION IN THE HIGH PERFORMANCE
SCHOOL VALLE DEL AMBROZ 2025.

I, Mr./Ms. _____, with ID number: _____
and address at _____,
as the father, mother, or legal guardian of the minor listed below, by means of this document:

I AUTHORIZE my son/daughter _____,
minor, aged _____ years, with ID number: _____,
residing at _____, and born on
____/____/____, to attend and participate in the High Performance School Valle del Ambroz,
including any necessary transfers or travel required for the development of the scheduled
activities during the contracted period.

Furthermore, we have carefully read the information provided by the organization and accept
the participation conditions, as well as the organizational, development, transportation, and
safety measures that may be necessary to be adopted by the organization.

Finally, exercising the rights guaranteed by law, I declare my intention to participate in the High
Performance School Valle del Ambroz, assuming personally and individually all consequences
and responsibilities.

In _____, on (day/month/year) ____ / ____ / ____

Signature: _____