



Parental Authorization
NordicWalkin’Lyon 2019

I, the undersigned, Mrs., Mr. (First Name and Family Name)

Living (complete postal adress) :

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.....

Acting as the : Father Mother Guardian

Authorise (First Name and Family Name) :

Birth Date :/...../.....

Living (complete postal adress) :

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To take part to one of the Nordic Walking Hikes of NordicWalkin’Lyon on Sunday, 13th of October 2019

I certify on the honor that I have the authority on this kid.

Date and signature of the parent preceded by the mention « Read and approved »