GRAVEL MEETING ®

MINOR PARTICIPATION AUTHORIZATION

V 1.0 11-08-2025

I,, parent/legal guardian of the minor identified below:
Minor's name:
Date of birth:/ Document:
1. Authorize the minor to participate in the Gravel Meeting, stating that I have read and accept the
regulations and the waiver of liability document.
Confirm that the minor is in good physical and mental health.
3. Assume all risks related to participation, releasing the organization, staff, sponsors, and landowners
from any liability.
4. Authorize the provision of urgent medical care if necessary.
5. Confirm that the minor has valid insurance for this type of event.
6. Authorize the processing of the minor's personal data for event participation purposes, in accordance
with applicable legislation.
7. Acknowledge that participation is under my responsibility.
Date:/ Parent/guardian signature: