## DOC 3 BY POST + FORM 1

**DATAS OF DANCER** 

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## Release and authorization for the free use of images at PICCOLI TALENTI 2025

(One form for each student - complete in block capitals)

SUNIVAIVIE	IVAIVIE
DATE OF BIRTH	PLACE OF BIRTH
	ADDRESS
DATAS OF PARENT OR TUTOR	
SURNAME	NAME
DATE OF NIDTH	DIACE OF BIDTI
DATE OF BIRTH	PLACE OF BIRTH
	ADDRESS
Ve. the undersigned, unconditionally accept the competition re	ules, which we have read in their entirety. We grant Areadanza the
	rize the free and total use, without limits of space and time, of the
	with Legislative Decree 196/2003, so-called on "privacy". We relieve
	for any accident, malaise or injury that may occur to the competitor
	ticular that his physical and athletic fitness for the practice of dance
s absolute and proven by a specific medical certification	ticalar that his physical and attrictic hitress for the practice of dance
s absolute and proven by a specific medical certification	
Date place	
	Signature of parent or tutor
	Signature of parent of tator
Name of dance school	Stamp
Signature of legal representant/Dire	ctor/President of dance school