



ASSOCIACIÓ
PUIGCERDÀ MUSIC

Puigcerda Music Festival Master Class AUTHORIZATION FORM FOR MINORS

I, _____ with _____ DNI/Passport _____ Number: _____
_____ mother/father of Student _____, give my
son/daughter the authorization to participate in the Puigcerda Music Festival
Master Class 2020, and accept that the course does not provide any underage
supervision of minors, and I am responsible for the arrangements of underage
supervision.

First Name: _____ Last Name: _____

Date: _____

Signature: