

FORM FOR PARENTS OF STUDENTS UNDER 18 INTERNATIONAL MASTERCLASSES – SUMMER EDITION 17-29 AGOSTO 2024, NARNI (TR), UMBRIA

The undersigned.....
Born in..... on.....
Address.....
Authorizes his/her son/daughter.....
Nato a.....il.....
Born in..... on.....
Address.....

To attend the International Masterclasses - Summer Edition, organized by Associazione Mozart Italia sede di Terni, that will take place in Narni (TR, Italy) from the 17th to the 29th of August, 2024. The undersigned declares to have taken vision of and to fully accept the regulations of the course. He/she further declares to exonerate the Associazione Mozart Italia Sede di Terni from any responsibility for any damage that my son/daughter may possibly encounter or inflict to other people for the whole period of the masterclasses.

Date.....

Signature.....

(Please attach a copy of a valid ID of the undersigned)