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- That in my capacity as the father, mother, legal guardian or representative of the Underage Person, I have the capacity to grant this authorization;
- That no third party's consent or involvement is needed, with the exception of the persons who might have executed this authorisation along with me; and
- That the Contributor can enjoy and freely exploit the rights provided hereby.

In witness thereof, I sign this document in the place and on the date identified beside my signature.

Representative details:

Full name: _____

Date of birth: _____

Id document no: _____

Address: _____

Nationality: _____

Sign: _____ Date and place: _____

Underage Person details:

Full name: _____

Date of birth: _____

Id document no: _____

Address: _____

Nationality: _____

Sign: _____ Date and place: _____

(In the event that the Underage Person is older than 14 years he/she must sign in addition to the Representative).

Photographer details:

Full name: _____

Date of birth: _____

Id document no: _____

Address: _____

Nationality: _____

Email: _____

Sign: _____ Date and place: _____



Visual reference: