

FORMAT FOR PROXY DELIVERY OF TECHNIQUE ENVELOPE AND RACE PACK
To fill-in and send by email at ISCRIZIONI@GRANFONDODELPO.IT

Name and Surname _____

born in _____ date of birth (dd/mm/yyyy) _____

resident in (nation) _____

Address _____

city _____ postal code _____

identity document type _____ n. _____

issued by _____ date of issue (dd/mm/yyyy) _____

DELEGATE

Name/Surname _____

as _____

born in _____ on _____

born in _____ date of birth (dd/mm/yyyy) _____

resident in (nation) _____ postal code _____

city _____

identity document type _____ n. _____

issued by _____ date of issue (dd/mm/yyyy) _____

to collect his own technical envelope end race pack

Attach:

- Team members: copy of the card and identity document.
- Non-members: Medical certificate, ethic declration

Date

Signature