





AUTHORISATION FORM FOR UNDER-18S

(under 18 and over 15 years of age)

(name of the father/mother/guardian), with
National ID/NIE/PASSPORT and address
, acting in their capacity as
(father/mother/guardian) of the minor (name of the
minor), of (years of age), with National ID/NIE/PASSPORT and
address
HEREBY AUTHORISES the registration of their child as as user of the Ambici service.
To this end, he/she declares that he/she assumes full responsibility for the use of the
service by his/her child, and authorises the Ambici service to take any payments
related to the subscription to the service, as well as any charges deriving from its use,
from the designated bank card of which he/she is the holder.
And, in order to give effect to this authorisation, signs below, in the place and on the date indicated.
Signed:
(municipality), (day) of (month) of
(year)