



7 MAYO 2022

Puerto de la Cruz / Tenerife
Islas Canarias

¡CICLISMO DE ALTURA!

DORSAL COLLECTION AUTHORIZATION

Mr/Mrs _____ on DNI/
NIE/Passport number _____, enrolled in the **VUELTA AL TEIDE**.

I authorize:

Mr/Mrs _____ on
DNI/NIE/Passport number _____ to collect on my behalf the number, the cyclist's bag,
the chip and all that material necessary to participate in the **VUELTA AL TEIDE 2022**, in the place
authorized by the Organization for this purpose, understanding that it is personal material and non-
transferable, and that you cannot **be used during the Test by someone other than me**.

In _____ on may _____ 2022

Signed Cyclist

Name:

DNI/NIE/Passport:

Signed by the person who withdraws the Dorsal

Name:

DNI/NIE/Passport:

[Deliver the document duly completed and signed by the registered cyclist and by the authorized person, in addition to a copy of the participant's ID, when picking up the number].



7raid.com

info@7raid.com



vteide.com

info@vueltaalteide.com

BASIC INFORMATION ON DATA PROTECTION

Responsible: Responsible: ADRAR 7Raid Sports Club, Calle Catedral 20, Tauro Building, F27, 38204, San Cristóbal de, info@7raid.com. **Purpose:** Your ID for bib pick-up. **Legitimation:** Business relationship. **Recipients:** Data will not be communicated to third parties except by legal obligation. **Your Rights:** You have the right of access, rectification, portability, deletion, limitation and opposition to its treatment, as explained in the additional information. **Additional Information:** You can consult the Privacy Policy at www.vteide.com.