

## AUTHORIZATION TO COLLECT THE 1000 MIGLIA 2026 PASS

TYPE OF PASS	MR./MS.

### AUTHORIZATION TO MR./MS.

Authorized Person

Mr. (name) \_\_\_\_\_ (surname) \_\_\_\_\_

Born in \_\_\_\_\_ on \_\_\_\_\_

Resident in \_\_\_\_\_ City \_\_\_\_\_

Telephone N° \_\_\_\_\_ ID Document \_\_\_\_\_

Issued by \_\_\_\_\_ Number \_\_\_\_\_

### TO COLLECT THE PASSES AS IDENTIFIED ABOVE

Releasing 1000 Miglia S.r.l. and the staff appointed by the same from any and all liability arising from the receipt of the pass and the use thereof.

Please note that, in accordance with the signed Accreditation Regulations, the pass is strictly personal and nominal and that it is strictly forbidden to give it to third parties.

Signature of the authorized person \_\_\_\_\_

Place \_\_\_\_\_ date \_\_\_\_\_