

REGISTRATION FORM FOR NON-EMANCIPATED MINORS

Registration on the **SUMA - Air Europa** programme by non-emancipated minors aged under 18 must be formalised by the adult of legal age that holds custody of the minor (parents or guardians) and who will act as their legal representative.

PERSONAL DETAILS

Child 1					
1 ^{er} LAST NAME	<input type="text"/>	2 ^o LAST NAME	<input type="text"/>	NAME	<input type="text"/>
DATE OF BIRTH	<input type="text"/>	SEX	MASCULINO <input type="checkbox"/> FEMENINA <input type="checkbox"/>	NATIONALITY	<input type="text"/>
TYPE OF DOCUMENT*	DNI <input type="checkbox"/>	PASSPORT <input type="checkbox"/>	RESIDENT CARD <input type="checkbox"/>	DOCUMENT NUMBER	<input type="text"/>
Child 2					
1 ^{er} LAST NAME	<input type="text"/>	2 ^o LAST NAME	<input type="text"/>	NAME	<input type="text"/>
DATE OF BIRTH	<input type="text"/>	SEX	MASCULINO <input type="checkbox"/> FEMENINA <input type="checkbox"/>	NATIONALITY	<input type="text"/>
TYPE OF DOCUMENT*	DNI <input type="checkbox"/>	PASSPORT <input type="checkbox"/>	RESIDENT CARD <input type="checkbox"/>	DOCUMENT NUMBER	<input type="text"/>
Child 3					
1 ^{er} LAST NAME	<input type="text"/>	2 ^o LAST NAME	<input type="text"/>	NAME	<input type="text"/>
DATE OF BIRTH	<input type="text"/>	SEX	MASCULINO <input type="checkbox"/> FEMENINA <input type="checkbox"/>	NATIONALITY	<input type="text"/>
TYPE OF DOCUMENT*	DNI <input type="checkbox"/>	PASSPORT <input type="checkbox"/>	RESIDENT CARD <input type="checkbox"/>	DOCUMENT NUMBER	<input type="text"/>

SHARED INFORMATION

ADDRESS	<input type="text"/>			N°	<input type="text"/>
CITY	<input type="text"/>	ZIP CODE	<input type="text"/>	PROVINCE	<input type="text"/>
COUNTRY	<input type="text"/>	TELEPHONE	<input type="text"/>		

DISCLAIMER

I, Mr / Ms. _____ as father / mother / guardian or legal representative and holder of ID Card No. /passport (please cross out the one that does not apply) _____ hereby agree to the issue of the **SUMA** card in the name of my minor son/daughter / minor ward / the minor represented by me.

MOBILE	<input type="text"/>	EMAIL	<input type="text"/>	SUMA CARD	<input type="text"/>
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Likewise, I hereby declare that I accept responsibility for the use and administration of the minor's card, holding **AIR EUROPA** harmless from all liability arising from the administration and use of the card.

Date _____ Legal Representative's signature _____