

**POWER OF ATTORNEY**

**on behalf of legal entity**

\_\_\_\_\_ 20\_\_\_\_\_  
(city)

\_\_\_\_\_  
(full name of the principal organization, indicating the type of business entity)

as represented by \_\_\_\_\_  
(job title and full name of the principal)

acting on the basis of \_\_\_\_\_  
(document establishing the authority of the principal)

hereby authorizes \_\_\_\_\_  
(full name of the authorized person)

passport number \_\_\_\_\_, telephone number \_\_\_\_\_,

to collect **participant accreditation badges** in accordance with the attached list from the  
\_\_\_\_\_ accreditation point.

*The list of participants attached (the power of attorney is not valid without a list of all participants to be accredited, copies of their passports, and original personal data consent forms).*

Power of attorney granted until \_\_\_\_\_ 20\_\_\_\_\_.

Principal signature \_\_\_\_\_ / \_\_\_\_\_  
(full name of the principal)

Authorized person signature \_\_\_\_\_ / \_\_\_\_\_  
(full name of the authorized person)

AFFIX SEAL HERE

**List of participants to be accredited attached to the power of attorney on behalf of legal entity**

*(The power of attorney is not valid without a list of all participants to be accredited, copies of their passports, and original personal data consent forms)*

<b>Full name</b>	<b>Date of birth</b>	<b>Passport number</b>

Principal

\_\_\_\_\_  
(job title)

\_\_\_\_\_/\_\_\_\_\_  
(signature) (full name of the principal)