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## Children's Royalty Program Enrollment Form



### Child's Personal Information

Child's Full Name: \_\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_\_

Nationality/Gender: \_\_\_\_\_

Current Residence (City, Country, Zip): \_\_\_\_\_

**Parent/Guardian Contact Information**

Parent/Guardian Full Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Postal/Zip Code: \_\_\_\_\_

Current Residence (City, Country): \_\_\_\_\_

(if different from the child's):

**Optional Survey or Feedback Section**

How did you hear about our Children's Royalty Program? \_\_\_\_\_

Are there any specific interests or needs of your child that we should know about?

\_\_\_\_\_

**Consent and Agreement**

I, \_\_\_\_\_ [Parent/Guardian's Name], hereby give consent for my above mentioned child to participate in the "Children's Royalty Program". I acknowledge and agree to the program's rules and guidelines.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Submission Instructions**

Please submit the completed form along with the required payment of \$299.00 to [register@blockchaintrust.pro](mailto:register@blockchaintrust.pro) For any queries, contact us at:

**Blockchain International Corporate Registry Authority**

**Tel: +1-587-430-2692**

[register@blockchaintrust.pro](mailto:register@blockchaintrust.pro)

[www.blockchaintrust.pro](http://www.blockchaintrust.pro)

