

## REGISTRATION FORM

**STUDENT'S FIRST AND LAST NAME:**Gender: M  or F 

Nationality:

Address:

City and Post Code:

Country:

Telephone num.:

Mobile Num.:

E-mail :

Place and Date of Birth:

Health Card Num.:

Identity Card or Passport Num.:

Medical Data (allergies, diseases, etc.):

Current School name and academic year:

I will participate to: Whole school year  1º Term  2º Term **FIRST AND LAST NAME OF STUDENT'S MOTHER:**

Mobile Num.:

E-mail:

Identity Card or Passport num.:

Job title:

**FIRST AND LAST NAME OF STUDENT'S FATHER:**

Mobile Num.:

E-mail:

Identity Card or Passport num.:

Job title:

**AUTHORIZATION:** I authorize the Institute and the Organization of Interschools Plus to obtain and use the name and the images of the underage, related to educational activities of the program and to its publication in the following media in order to present and disseminate the different activities they carry out: **YES**  **NO**  Web of the Organization and the Institute  
**YES**  **NO**  Social networks of the Organization and the Institute (Facebook, Instagram)  
**YES**  **NO**  Corporate publication in presentations, circulars, newsletters

The organization undertakes that the dissemination does not constitute an illegitimate intrusion in the privacy, honor or reputation of the underage or is contrary to their interests, all in accordance with the terms established in art.4 No. 3 of LO1 / 1996, of Legal Protection of Minors and express consent for this purpose.

**AUTHORIZATION FOR STUDENTS OF "BACHILLERATO":** **YES**  **NO**  I authorize the underage to leave the Institute during recess at school, assuming any responsibility that may arise from it.

**DATE:****SIGNATURE OF PARENT/LEGAL GUARDIAN:**

In accordance with Organic Law 3/2018, on the 5<sup>th</sup> December on Protection of Personal Data and guarantee of digital rights, and Regulation (EU) 2016/679 of the European Parliament and of the Council of April 27, 2016, we inform you which the data will be processed by Interschools Plus for the purpose indicated and to manage this authorization. At any time you can exercise for free the rights of access, rectification, deletion and other rights recognized in the aforementioned regulations, by sending a request via email to: [info@interschoolsplus.es](mailto:info@interschoolsplus.es) , attaching a photocopy of the Identity Card or equivalent document. You can request additional information about how we treat your data to the indicated email.