

COACH FORM

TO ORGANIZING AUTHORITY : CIRCOLO VELA TORBOLE SCSD

FOR THE EVENT : 2 LUPO CUP

Which will take place : 2022 April 20th-23RD

IL Sottoscritto/a

Name and Surname of the Coach:	
date of birth:	
Club	
Type	Motorboat <input type="checkbox"/>
Model:	
Motor:	License(up to 40hp) <input type="checkbox"/>
Telephone number of the coach:	

ASKS

to be allowed to go out in the water with the above described vehicle during the event in question. I explicitly declare that I accept all the rules indicated in the I.Sa.F. RRS in force, in the Notice, in the I.Sa.F. RRS, in the Notice, in the Instructions and in the other Rules and Regulations governing this event. Pursuant to art. 6, paragraph 1), lett. a) of the EU Regulation n. 679/2016 (GDPR) I hereby authorise Circolo Vela Torbole to process my personal data for the sole and exclusive purposes related to the organisation and management of the regatta and better detailed in the information note on the processing of personal data which I expressly declare to have read.

DATE _____

SIGNATURE _____

(RESERVED FOR THE
SECRETARIAT)

Permission Number _____

Flag _____

Deposit € 20,00

The coach is authorised to go out into the water during the event.
This authorisation may be revoked at any time at the discretion of the Organising Committee.

Date _____

Secretariat _____

ATHLETES

Name	Sail number

The coach declares that he/she is qualified to drive the boat and that the boat is in order with the documents required by law and with the safety equipment provided.

Date _____ Signature _____

ATHLETE FOSTER CARE FORM

2 LUPO CUP April 20-23 2022

DISCLAIMER FOR THE REGISTRATION AND CUSTODY OF THE MINOR PARTICIPANT TO THE SAILING EVENT IN QUESTION

The undersigned (name and surname)

Date of birth and place _____

Document number: _____
as parent(s) exercising parental responsibility by completing this form

authorise registration

to the event _____

which will take place on 20-23 April at Circolo Vela Torbole

of the minor Name Surname _____

Date and palce of birh _____

The above-mentioned child will be entrusted to the manager/instructor

Name Surname _____

Place and date _____

Signature of the person exercising parental responsibility _____

Authorisation to process personal data

Pursuant to art. 6, paragraph 1), lett. a) of the EU Regulation no. 679/2016 (GDPR) I hereby authorise Circolo Vela Torbole to process the aforementioned personal data for the sole and unique purposes inherent to the organisation and management of the regatta and better detailed in the information note on the processing of personal data of which I expressly declare to have read.

Signature of the person exercising parental responsibility