

## **REGISTRATION FORM**

NAME	SURNAME	
BORN	N (country) DATE	
E-MAIL	ADRESS	
REGIS <sup>*</sup>	ERS TO PARTECIPATE TO THE TREKKING OF THE DAY	
DATE <sub>-</sub>	SIGNATURE	
Teleph	one number to contact in case of emergency	
For fur	ner information, please read the general rules.	
0	I agree with the treatment of my personal data, in compliance with the GENERAL EUROPEAN LAW (GDPR– REG UE 2016/679)	V
0	I give my consent for the publication, free of charge, on Naturtrekk social media of the photos and videos of myselfthat may have been taken during the trekking	ł
0	I declare I have read the general rules	
	son in charge and responsible for data treatment is Federico Mazzoleni, owner of Naturtrekk agen personal material will be used only for purposes connected to Naturtrekk activity.	су.