

ENTRY FORM

The undersigned association _____ register the following competitors for the international races for athletes with intellectual impairment from 18.03.2022 to 20.03.2022 in Ratschings:

Team:	
Address:	
Contact person:	
Tel.:	email:

Family name / First name	Gender m/f	Date of Birth	National Ski Card Number	Class/Categories	SG	GS	SL

_____, on ____ . ____ . ____
Place Date

Stamp and signature

Information regarding the processing of personal data

With the registration for the event, by personal signature or by collective registration by the respective club, I confirm the receipt of detailed information regarding the processing of my personal data as well as the right to information, correction, deletion and restriction of processing. Furthermore, I agree to the possible production and further use of the photographs or other image/sound documents taken by me at the event by the ÖBSV, including the naming of my name.

Proximity information can be found in the supplement to the announcement "Information obligation according to Article 13 DSGVO".