



Associação de Pais e Encarregados de Educação do Agrupamento de Escolas de Grândola

REGISTRATION FORM

IDENTIFICATION OF THE GUARDIAN/PARENT

MEMBER N.º _____

Full name _____

Address _____

Zip Code _____ City _____

Tax Identification Number/Passport _____ Nationality _____

Telephone Contact(s) _____

E-mail _____

In the previous school year, I was a member of the Parents' Association? Yes No

STUDENT INFORMATION

Full name _____

School _____ Is this my first year at this school? Yes No

Year _____ Class _____ Student Number _____

Full name _____

School _____ Is this my first year at this school? Yes No

Year _____ Class _____ Student Number _____

Full name _____

School _____ Is this my first year at this school? Yes No

Year _____ Class _____ Student Number _____

FEES PAYMENT

The Guardian / Parent declares that, in accordance with the Statutes of the Associação de Pais e Encarregados de Educação do Agrupamento de Escolas de Grândola, APEEAEG, they are contributing this school year with the annual fee of _____ Euros (minimum value of 5 Euros).

Payment method: Bank transfer Cash Other

Signature of the Parent/Guardian _____ Date: ____/____/____

To be completed by APEEAEG:

Received by: _____ Date: ____/____/____

Receipt N.º: _____ Registration date: ____/____/____

INFORMED CONSENT DECLARATION - PERSONAL DATA

. The personal data contained in this Registration Form is intended exclusively for the management of members by the Associação de Pais e Encarregados de Educação do Agrupamento de Escolas de Grândola, APEEAEG. The data is confidential, will only be used for its intended purpose and will not be disclosed. At any time, you may correct, modify, restrict, anonymize or delete your personal data, thus exercising your right to withdraw previously granted consent by sending an email to [email address]. associacao.pais.grandola@gmail.com.

. I, as the parent/guardian, declare that I am informed and authorize APEEAEG to process and use my personal data and that of the student as stated in this Registration Form, namely through collection, registration and integration into databases, organization, storage, adaptation, alteration, retrieval, consultation and use for the intended purpose.

. I also expressly authorize APEEAEG to send me information about its activities, using the personal data contained in this Registration Form through any communication channel, including mail, email, telephone and SMS..

Signature of the Parent/Guardian: _____ Date: ____/____/____