



REGISTRATION FORM

This form to be sent by fax to +39.0541 830168 or by email to: info@granfondosquali.it attaching a copy of receipt for payment by bank transfer to: VELO CLUB CATTOLICA Via E.Romagna 67 47841 CATTOLICA (RN) ITALY

Payment reason: registration for GRANFONDO SQUALI BIKE MARATHON 2019, NAME OF CYCLIST: IBAN IT 26 J 08578 67750 000030112498 BIC ICRAITRRG20 • Online registration by credit card: www.granfondosquali.it

<i>Price and Payment</i>	
Participation fee	<input type="checkbox"/> € 59,00 <input type="checkbox"/> € 34,00 only 300 entries
Participation fee combined with hotel stay	<input type="checkbox"/> € 29,00 for reservations until February 28th Hotel name _____
Payment	Total amount € _____ date of payment _____
<i>Personal data</i>	
Surname	_____
Name	_____
Date of birth	____ / ____ / ____
Sex	<input type="checkbox"/> M <input type="checkbox"/> F
Nationality	_____
Adress	_____
City - Country	_____
Nation	_____
Mobile phone	_____
E-mail	_____
<i>Sports data</i>	
Federation	<input type="checkbox"/> UCI <input type="checkbox"/> Other _____
Cycling club code	_____
Cycling club name	_____
Membership N°	_____
Health form	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Other informations</i>	
Route	<input type="checkbox"/> Long <input type="checkbox"/> Short
First participation	<input type="checkbox"/> Yes <input type="checkbox"/> No

The undersigned hereby declares, by completing this registration and collecting a race number for the GRANFONDO SQUALI ON 10-12 MAY 2019, that he/ she is in good physical condition and has appropriate health certification for taking part in sporting events of this type. I accept the terms of participation. By signing, I hereby declare I am familiar with and will respect the regulations of the GRANFONDO SQUALI published in full at the Internet site www.granfondosquali.it, all the event sponsors, all the event administrators and institutes, and their respective representatives, and that I accept all present and future claims or responsibility of any type deriving from my participation in the event. I grant my authorisation to all the institutes listed above to use photographs, tapes, videos and images within websites and anything relating to my participation in the event for any legitimate use without remuneration. INFORMATIONAL NOTE: in accordance with art. 13 of Italian Legislative Decree. 196/2003 ("the Personal Data Protection Code"), please note that 1) the data contained in the registration form is required for the registration in order to prepare the list of participants, the classification and the historic archive, to execute the services stated in the Regulations and to send information material pertaining to the "Granfondo Squali", and that the data contained in this form is required for Granfondo Squali registration. 2) the consequences of failure to grant the data or information indicated above is non-admission to the event. 3) with your consent, your personal details indicated in the personal details section may be communicated to other companies and used to contact you and to send you commercial and/or promotional information relating to products and services and to carry out statistical analysis and market studies and research. The updated list of the companies to whom your details may be communicated is available from the Data Controller. In this case, these companies may contact you as Organizers of independent initiatives, for market research or to send you commercial information and/or promotional offers relating to products and services. Your details will be retained and handled in accordance with the security measures required by the Law, with or without the assistance of electronic means. - Rights of the interested party (art. 7 Italian Legislative Decree 196/03). At any time, the interested party may consult, modify and delete, free of charge, his/her details by writing to the Personal Data Manager at Granfondo Squali. I permit the communication of my details in order to allow you to receive scientific and commercial information, free samples and discounts or to be contact for opinion surveys.

Date _____

Signature _____