

SURNAME AND NAMES OF THE PARENT / GUARDIAN

PESEL NO. OF THE PARENT / GUARDIAN

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PLACE OF RESIDENCE WITH A ZIP CODE OR ADDRESS FOR CORRESPONDENCE

E-MAIL

PHONE NO.

FILL IN IN THE CASE OF A MINOR'S OBLIGATION

I accept responsibility for the fulfillment of the obligations towards the Library of the person whose data is stated on the back, I have read the Library Terms & Regulations and undertake to comply with them and I have read the information regarding the processing of personal data.

I give my consent pursuant to art. 6 sec. 1 point a) of Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of individuals with regard to the processing of my child's personal data on the free movement of such data and repealing Directive 95/46 / EC (general regulation on data protection, Journal of Laws of the EU. 2016.119.1 of May 4, 2016) - hereinafter referred to as the GDPR, information of the administrator on: <https://www.bpwola.waw.pl/2021/05/10/informacja-administratora>

DATA I PODPIS RODZICA/OPIEKUNA

HEREBY I AUTHORIZE THE USE OF MY ACCOUNT

SURNAME AND NAME OF
AUTHORIZED PERSON

PARENT/GUARDIAN
SIGNATURE

READER RECORD CARD

SURNAME AND NAMES

PESEL (ID NO.)

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STATISTICAL TYPE

 learning working other

PLACE OF RESIDENCE WITH A ZIP CODE

CORRESPONDENCE ADDRESS

E-MAIL

PHONE NO.

I give my consent pursuant to art. 6 sec. 1 point a) of Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of individuals with regard to the processing of my child's personal data on the free movement of such data and repealing Directive 95/46 / EC (general regulation on data protection, Journal of Laws of the EU. 2016.119.1 of May 4, 2016) - hereinafter referred to as the GDPR, information of the administrator on: <https://www.bpwola.waw.pl/2021/05/10/informacja-administratora>

I am consent / I am not consent to be notified about the dates of return of borrowed materials, about the possibility of collecting the ordered materials and conducting correspondence of a similar nature by e-mail and telephone

I am consent / I am not consent to provide information about the Library's activities by e-mail and telephone.

I declare that I have read the Library Regulations, I undertake to comply with them and bear responsibility for any damage caused. I declare that I have read the information regarding the processing of personal data.

DATE AND READER'S SIGNATURE

DATE AND LIBRARIAN'S SIGNATURE