

SWIMMING LESSONS:

REGISTRATION

RE-REGISTRATION

FREE SWIMMING

USER ID (TO BE COMPLETED BY THE APPLICANT)

FULL NAME: _____

DATE OF BIRTH: ____/____/____ TAX ID.: _____ USER NUMBER: _____

ADDRESS: _____

ZIP CODE: ____ - ____ _____

EMAIL: _____

CONTACT(S) FOR NOTIFICATION: _____

AUTHORIZATION FOR THE PAYMENT BY ATM REFERENCE

THE SENDING OF INVOICE BY MAIL FOR PAYMENT BY ATM REFERENCE.

STATEMENT OF RESPONSIBILITY

- I ASSUME FULL RESPONSIBILITY FOR THE VERACITY OF THE STATEMENTS MADE.
- I AM AWARE OF THE REGULATIONS FOR THE OPERATION AND USE OF THE ARGANIL MUNICIPAL SWIMMING POOL, GENERAL RULES AND REGULATIONS. WHICH I HAVE READ AND AGREE TO, UNDERTAKING, DURING THE PERIOD OF USE, TO FULLY COMPLY WITH IT
- I UNDERTAKE THAT THERE IS NO CONTRAINDICATION TO THE PRACTICE OF THE SUBSCRIBED MODALITY IN ACCORDANCE WITH ARTICLE 40 OF LAW NO. 5/2007 OF 16 JANUARY.
- I FURTHER DECLARE THAT, SHOULD THE CURRENT CONDITIONS CHANGE IN THE FUTURE, I ASSUME THE RESPONSIBILITY TO INFORM THE MUNICIPAL POOL SERVICES OF ARGANIL.
- I AUTHORIZE TO RECEIVE THROUGH SMS AND/OR EMAIL INFORMATION ON THE SERVICES/AND ACTIVITIES EXCLUSIVELY OF THE MUNICIPAL POOL OF ARGANIL.

DATA PROTECTION

THE MUNICIPALITY OF ARGANIL COMPLIES WITH THE GENERAL DATA PROTECTION REGULATIONS REGARDING THE COLLECTION AND PROCESSING OF DATA. THE DATA COLLECTED IS INTENDED EXCLUSIVELY FOR THE PROCESSING OF THIS APPLICATION. FOR FURTHER INFORMATION PLEASE CONTACT DPO@CM-ARGANIL.PT

IMAGE RIGHT

THE MUNICIPALITY OF ARGANIL CARRIES OUT THE PHOTOGRAPHIC AND VIDEO RECORDING, PROCESSING AND USE OF IMAGES FROM EVENTS AT THE ARGANIL MUNICIPAL SWIMMING SCHOOL, NAMELY SWIMMING FESTIVALS AND TOURNAMENTS DURING THIS SEASON. THE IMAGES COLLECTED AT THE EVENT WILL BE USED EXCLUSIVELY FOR NEWS PURPOSES OF THE ARGANIL MUNICIPAL SWIMMING SCHOOL, AS WELL AS ITS PROMOTION, THROUGH THE ARGANIL MUNICIPAL SWIMMING SCHOOL PORTAL AND RESPECTIVE SOCIAL NETWORKS (FACEBOOK AND INSTAGRAM), MUNICIPAL BULLETIN, LOCAL WRITTEN PRESS, AS WELL AS POSTERS PROMOTING THE VARIOUS MODALITIES AND ACTIVITIES OF THE ARGANIL MUNICIPAL SWIMMING SCHOOL.

THE MUNICIPALITY OF ARGANIL IS NOT RESPONSIBLE FOR THE USE, REPRODUCTION AND SHARING BY THIRD PARTIES ON SOCIAL NETWORKS (FACEBOOK, INSTAGRAM, OR OTHERS), THE MEDIA OR IN ILLUSTRATIONS, VIDEOS, ANIMATIONS, PAMPHLETS, OR WEBSITES FOR NON-CONTRACTUAL ADVERTISING PURPOSES BY THE MUNICIPALITY OR FOR OTHER PURPOSES TOTALLY FOREIGN TO THE MUNICIPALITY, IN WHOLE OR IN PART, COLLECTED BY EMPLOYEES OF THE MUNICIPALITY OR BY THIRD PARTIES IN THE ACTIVITIES OR EVENTS OF THE MUNICIPAL SWIMMING SCHOOL.

I AUTHORIZE THE PHOTOGRAPHIC AND VIDEO RECORDING, PROCESSING AND USE OF IMAGES FROM EVENTS AT THE ARGANIL MUNICIPAL SWIMMING SCHOOL, AS STATED ABOVE.

PLEASE SELECT THE INTENDED SERVICE OF THE ARGANIL MUNICIPAL SWIMMING POOL

- | | | |
|--|--|--|
| <input type="checkbox"/> FREE SWIMMING | <input type="checkbox"/> BABIES (6 - 35 MONTHS) | <input type="checkbox"/> ADAPTATION TO THE AQUATIC ENVIRONMENT 1 (3 - 6 YEARS) |
| <input type="checkbox"/> ADAPTATION TO THE AQUATIC ENVIRONMENT 2 (6 - 9 YEARS) | <input type="checkbox"/> PRE-IMPROVMENT (9 – 13 YEARS) | <input type="checkbox"/> IMPROVEMENT 1 (11 – 13 YEARS) |
| <input type="checkbox"/> IMPROVEMENT 2 (≥ 14 YEARS) | <input type="checkbox"/> HYDRO GYMNASTICS | <input type="checkbox"/> SENIOR HYDRO GYMNASTICS |
| <input type="checkbox"/> ADULT SWIMMING | <input type="checkbox"/> AQUAGYM | <input type="checkbox"/> COMPETITION |
| <input type="checkbox"/> ADAPTED SWIMMING | | |

TIME SLOT YOU WANT:

- | | |
|---|--|
| <input type="checkbox"/> KEEP LAST YEAR'S SCHEDULE | |
| <input type="checkbox"/> MONDAY FROM ___:___ TO ___:___; | <input type="checkbox"/> TUESDAY FROM ___:___ TO ___:___; |
| <input type="checkbox"/> WEDNESDAY FROM ___:___ TO ___:___; | <input type="checkbox"/> THURSDAY FROM ___:___ TO ___:___; |
| <input type="checkbox"/> FRIDAY FROM ___:___ TO ___:___; | <input type="checkbox"/> SATURDAY FROM ___:___ TO ___:___; |

NOTE: THE AGE RANGES INDICATED AT THE ADAPTATION TO THE AQUATIC ENVIRONMENT 1 AND 2, PRE-PRACTICE, PERFECTING 1 AND PERFECTING 2 LEVELS ARE MERELY INDICATIVE, LEAVING THE STUDENT SUBJECT TO AN INITIAL EVALUATION, IN ORDER TO BE DEFINED BY THE TECHNICAL TEAM THE CORRESPONDING LEVEL OF EDUCATION.

REMARKS

THE APPLICANT _____

DATE ___/___/___

SIGNATURE _____