

APPLICATION FORM FOR USERS UNDER 16

(DATA OF A PARENT, GUARDIAN OR FAMILY MEMBER) (WRITE IN CAPITAL LETTERS)

Name	Surname
Date of birth	Fiscal code
Address	
	Postcode
one)	he moment. Please fill in the field if it is different from the firs
	Postcode
Telephone number	Mobile number
E-mail	
	Number
AS PARENT/GUARI	DIAN/FAMILY MEMBER OF (DATA OF THE CHILD)
Name	Surname
Date of birth	Fiscal code
Address	
City/Town	Postcode

aware of the penal sanctions that may be incurred in case of false declaration (DPR 445/2000);

aware that the loan service of materials, including the loan from MLOL (MediaLibraryOnLine), is reserved for those who live (also for a short period) in Veneto Region

APPLY FOR

 \Box the Library card

□ the subscription to **MediaLibraryOnLine - La biblioteca digitale**

 \Box the subscription to Library mailing list

The Public Libraries are committed to the processing of personal data only for institutional purposes to Legislative Decrees 2003/196 and 2018/101 and the Regulation (EU) 2016/679 GDPR (General Data Protection Regulation).

Date ___/__/____

Signature _____