Miklós Bánffy Memorial Endurance Tours
Saturday, July 13, 2019

Statement

PLEASE FILL OUT THE FORM WITH CAPITAL LETTERS:

The undersigned

Surname . . . . Name . . . .

Personal Identification Code (CNP) or ID card number: . . . .

I commit myself to accompany the following child:

Surname . . . . Name . . . .

Date of birth . . . .

for the whole length and duration of the Miklós Bánffy Memorial Endurance Hiking Tour 2019, I

will not leave the child unsupervised, and take responsibility for the child's actions.

I take notice of and declare the following:

- I take part in the event at my own risk; if an accident occurs during the event I shall not hold the organizers responsible, and I shall not seek damages for any reason.
- I have read the tour terms and I take notice of and accept them.
- I assume not to litter during the event, and to not harm the environment.
- During the event, photos and video recordings will be made at the request of the organizers. I agree to the use of these photos and video recordings, in which I too may appear, for the purpose of promoting the event and the organization.
- The organizers process the personal data provided by me by filling out this declaration for the following purposes: keeping a record of the participants, communication with the participants before, during and after the event, issuing of payment documents, documenting and acknowledging the participation at the event. I consent to the processing of the data provided for the above purposes.
- The organizers manage the processed data in a strictly confidential and safe manner, they do not disclose them to anyone, with the exception of data provision to the competent authorities (police, gendarmerie, ambulance, mountain rescue) in emergency situations (e.g. accident, getting lost).
- The persons carrying out the registration can request to have their data deleted from the organizers' records if they withdraw from the event, respectively after the event has ended.
- The data provided by me in this form are correct and truthful. I take full responsibility for these.

Date   . . . .   Signature . . . .