

MINOR registration form n° \_\_\_\_\_

**The undersigned parent/legal guardian**

Surname \_\_\_\_\_ Name \_\_\_\_\_

Place of birth \_\_\_\_\_ Date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex M  F

\*Identity document \_\_\_\_\_ N° \_\_\_\_\_

\*Fiscal code \_\_\_\_\_ **\*Please enclose a copy of the identity document and fiscal code of the parent/guardian and of the minor**

Residence: City \_\_\_\_\_ Province \_\_\_\_\_ Postcode \_\_\_\_\_

(street) \_\_\_\_\_ N° \_\_\_\_\_

Domicile: City \_\_\_\_\_ Province \_\_\_\_\_ Postcode \_\_\_\_\_

(street) \_\_\_\_\_ N° \_\_\_\_\_

Telephone n° \_\_\_\_\_ E-MAIL: \_\_\_\_\_ @ \_\_\_\_\_  
(in block letters)

The undersigned states following e-mail as personal digital address:  
\_\_\_\_\_ @ \_\_\_\_\_ to be used as exclusive address for every type of communication, while committing to keep it functioning and to communicate any relative change.

**hereby requests registration at the following multimedia centres and library with public services: the Audiovisual Centre (Centro Audiovisivi), the Multilingual Centre (Centro Multilingue) and the Provincial library in Italian language "Claudia Augusta" (Biblioteca provinciale italiana "Claudia Augusta") for**

Surname \_\_\_\_\_ Name \_\_\_\_\_

\*Fiscal code \_\_\_\_\_ \*Identity document \_\_\_\_\_

Date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex M  F

**USER GROUP**

- Pre-school age
- Elementary school pupil
- Middle school pupil
- High school pupil
- Other \_\_\_\_\_

**NATIONALITY**

- Italian
- European Union
- Other \_\_\_\_\_

**I wish to receive the newsletter regarding the following services:**

Audiovisual Centre       Yes  No     I am already a subscriber and receive the newsletter regularly  
Multilingual Centre       Yes  No     I am already a subscriber and receive the newsletter regularly  
Prov. library "C. Augusta"  Yes  No     I am already a subscriber and receive the newsletter regularly

The undersigned hereby authorizes the minor to use the Internet service offered by the Provincial library "C. Augusta" and is aware that he/she is responsible for any use of such service made by the minor

Yes     No

The undersigned hereby declares to have read the information about the protection of personal data in accordance to EU regulation 2016/679 and the rules governing access to the library services and agrees to comply with all their aspects (**see the text online: [www.provincia.bz.it/trevi-iscrizioni](http://www.provincia.bz.it/trevi-iscrizioni)**).

Date \_\_\_\_\_ Signature \_\_\_\_\_

Person authorized to process personal data \_\_\_\_\_