

APPLICATION FORM FOR USERS UNDER 14

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

Name	Surname	
Date of birth	Fiscal code	
Address		-
City/Town	Postcode	
one)	ne moment. Please fill in the field if it is different from the fir	st
	Postcode	
Telephone number	Mobile number	
E-mail		
	Number	
AS PARENT/GUARI	IAN/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**

□ 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 _____