



## CEMEC COURSES REGISTRATION FORM

to be returned to: [cemec@iss.sm](mailto:cemec@iss.sm)

Course info: + 39 0549-994535 / 994600 [www.cemec-sanmarino.eu](http://www.cemec-sanmarino.eu)

(Please write in block letters and complete all fields)

NAME \_\_\_\_\_ SURNAME \_\_\_\_\_

Place and data of Birth \_\_\_\_\_

Qualification \_\_\_\_\_

Place of work \_\_\_\_\_

Address \_\_\_\_\_

Mobile Phone \_\_\_\_\_ Phone \_\_\_\_\_ FAX \_\_\_\_\_

E MAIL \_\_\_\_\_

I wish to participate in: **CBRNe course 29-30 june 2023 San Marino/ on line**

**Course Fee:** 150 Euro. Payment via bank transfer.

Account Holder's Name: CEMEC

IBAN: SM37L0606709801000010151057

Account Number: 000010151057

Bank Name: Cassa di Risparmio di San Marino

Branch Name: Agenzia Via Scarito, 7, 47893 Borgo Maggiore, RSM

ABI: 06067

CAB: 09801

BIC/SWIFT: CSSMSMSMXXX

Country Code: SM

CIN-IBAN: 37

Personal Data Processing:

I, the undersigned \_\_\_\_\_ declare that I am aware of the information referred to in Art.13 and 14 of EU Reg. 679/ 2016 and Law 171/2018, in particular with regard to the rights granted to me by the aforementioned legislation and consent to the processing- of personal contact data for marketing activities through the sending of promotional material related to services similar to those covered by the relationship established with Cemec  presto il consenso nego consent

Sign \_\_\_\_\_ Date \_\_\_\_\_