



## APPLICATION FROM

### PARTICIPANT'S QUALIFICATION CARD OF

### SUMMER CAMP AT MONTESSORI FARM SCHOOL FOLWARK BIAŁKA

SUMMER 2022

#### I. INFORMATION ABOUT THE SUMMER CAMP

1. Date of the Summer Camp:

- Week 1st - (25.06 - 1.07)
- Week 2nd - (2.07 - 8.07)
- Week 3rd - (9.07 - 15.07)
- Week 4th - (16.07 - 22.07)
- Week 5th - (23.07 - 29.07)
- Week 6th - (30.07 - 5.08)
- Week 7th - (6.08 - 12.08)

2. Place of the Summer Camp: Białka 155, 21-300 Białka

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**Place and date**

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**Organizer's Signature**

#### II. INFORMATION ABOUT THE PARTICIPANT

1. Participant's First & Last Name

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2. Participant's Date of Birth

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3. Mother's/Legal guardian's First & Last Name

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Mobile number: \_\_\_\_\_

Email address: \_\_\_\_\_

4. Father's/Legal guardian's First & Last Name

Mobile number: \_\_\_\_\_

Email address: \_\_\_\_\_

Participant's Address \_\_\_\_\_

\_\_\_\_\_

Parents'/Legal guardians' Address of Stay during the Camp

\_\_\_\_\_

\_\_\_\_\_

5. Information about the special needs of the Summer Camp Participant

\_\_\_\_\_

\_\_\_\_\_

6. Important information about the health condition of the Summer Camp participant.

a. Does the Participant have any allergies or special needs?

YES / NO (delete as appropriate)

Allergens \_\_\_\_\_

Allergy symptoms \_\_\_\_\_

b. Does the Participant have a chronic / recurrent disease or is it undergoing a diagnosis?

YES, the Participant has a chronic / recurrent disease

YES, the Participant is being diagnosed

NO (delete as appropriate)

Disease \_\_\_\_\_

Symptoms \_\_\_\_\_

c. Has the Participant had any surgery? YES NO (delete as appropriate)

When and for what reason? \_\_\_\_\_

d. Does the Participant take medicine? YES NO (delete as appropriate)

Reason \_\_\_\_\_

Medicine name/ Dosage \_\_\_\_\_

e. Other important information about the Participant's health, psychophysical development and diet

\_\_\_\_\_  
\_\_\_\_\_

f. Information on Participant's immunization:

Tetanus	Diphtheria	Dur	Other
_____	_____	_____	_____

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parents'/Legal guardians' Signature**

**STATEMENT OF CONSENT TO PROCESS PERSONAL DATA**

We herewith grant consent to processing our and our child's data specified in this agreement or obtained by Children's House Sp. z o.o., with its principal place of business in Warsaw, in the process of our child's attending the School run by CDBWMS Children's House Sp. z o.o., with its principal place of business in Warsaw, for the purposes of our child's participation in Montessori Farm School and his/her participation in events, trips and excursions organised by CDBWMS Children's House Sp. z o.o. in the course of the Summer Camp. This consent has been granted voluntarily. We know that we will be able to cancel our consent any time by making a written statement of cancellation of our consent for processing of these personal data and delivering it to the School's office at 4 Szwoleżerów St. in Warsaw.

\_\_\_\_\_ date and signature

Pursuant to article 13, clause 1 and clause 2 of the General Data Protection Regulation of 27 April 2016, please be advised that:

- the controller of your personal data and the personal data of your child is the company CDBWMS Children's House Sp. z o.o., with its principal place of business in Warsaw 00-752, at ulica Szwoleżerów 4;
- the data protection officer at CDBWMS Children's House Sp. z o.o., with its principal place of business in Warsaw, is Ms. Marta Kiraga e-mail: [administracja@warsawmontessori.edu.pl](mailto:administracja@warsawmontessori.edu.pl);
- your and your child's personal data will be processed for the purpose of your child's participation in the camp, that is for the purpose of your child's participation in Montessori Farm School, Białka 155, commune of Radzyń Podlaski, and with his/her participation in events, trips and excursions organised during the camp on the grounds of article 6, clause 1, points a and b of the General Data Protection Regulation of 27 April 2016;
- your and your child's data will be stored until the end of the camp in which your child is participating;
- you have the right to access the content of your and your child's data and the right to correct, remove or restrict processing of the data, the right to protest against processing, the right to transfer data and the right to cancel your consent at any time without any influence on the legality of the processing carried out on the grounds of your consent before its cancellation;
- you have the right to bring a complaint to the President of the Personal Data Protection Office, in case you recognise that processing of personal data concerning you or your child violates the provisions of the General Data Protection Regulation of 27 April 2016;
- your provision of the personal data is a necessary condition for your child's participation in Montessori Farm School. Unless personal data is provided, it will be impossible to take part in the camp.

We herewith state that we have become familiar with the content of the above information concerning the processing of our and our child's personal data.

Date: \_\_\_\_\_

\_\_\_\_\_  
Parent's or guardian's signature

\_\_\_\_\_  
Parent's or guardian's signature

III. Summer Camp Organizer's decision upon qualifying the Camp Participant to participate in Summer Camp:

- To qualify and send the participant on Summer Camp
- Refuse to refer the participant to Summer Camp for the sake of

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**Date**

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**Organizer's Signature**