

## APPLICATION FOR PARTICIPATION

### X International Swimming Competitions „MASTERS”

Chairman’s Cup

Name		Year of Birth
OIIB membership no. / employee* / guest* * delete as appropriate		
E-mail:		Phone:

I declare that I have read the regulations of swimming competitions and I accept them (The rules of the competition are on [www.maz.piib.org.pl](http://www.maz.piib.org.pl)); I compete at my own risk, the state of my health does not raise any objections and my swimming skills are sufficient for safe participation in swimming competitions. In accordance with Art. 6 para. 1 point (a) general regulation on the protection of personal data of April 27, 2016, participation or presence on the premises during the competition is treated as a consent to the processing of personal data, i.e. name, surname, year of birth, telephone number, e-mail, membership number (in the case of MOIIB membership), for other people, the fact of belonging to a specific association, self-government, university or representing another Institution, in order to participate in competitions organized by the Mazovian District Chamber of Civil Engineers (MOIIB) and image to build a positive MOIIB image in the public space and in the media. I agree to the publication of my image captured in photos, video, streaming from the competition.

INFORMATION CLAUSE. According to Article 13 of the General regulation on personal data protection as of 27th April 2016 (Official Journal of the European Union no L 119, 4.5.2016), I would like to inform that:

1. the Administrator of your personal data will be Mazovian District Chamber of Civil Engineers (MOIIB),
2. you may contact the Administrator through the E-mail: [dane\\_osobowe@maz.piib.org.pl](mailto:dane_osobowe@maz.piib.org.pl),
3. your personal data will be processed in order to organize the competition and to build a positive image of the MOIIB in the public space and in the media,
4. your personal data will be processed during the period of 6 years, for MOIIB members information about the completed training is stored indefinitely in order to document the improvement of the professional qualifications of the member, the image data is stored until the consent is withdrawn,
5. the recipients of your personal data will be the company servicing the competition in scope of name, surname and age (age category of the participant) and the insurer in the scope of name, surname and year of birth,
6. you are entitled to request that the Administrator grant you access to the personal data, correct, remove the data or limit the data processing,
7. you have the right to file a complaint with any supervisory body,
8. providing personal data is obligatory in order to confirm participation in the competition, and in terms of image is voluntary by participating in the competition.

### COMPETITIONS:

WOMEN	MEN	RELAY-RACES
1. 25 m freestyle women	2. 25 m freestyle men	13. 4 x 25 m freestyle women
3. 25 m breaststroke women	4. 25 m breaststroke men	14. 4 x 25 m freestyle men
5. 25 m backstroke women	6. 25 m backstroke men	15. 4 x 25 m freestyle mix (2 women and 2 men)
7. 50 m freestyle women	8. 50 m freestyle men	
9. 50 m breaststroke women	10. 50 m breaststroke men	
11. 50 m backstroke women	12. 50 m backstroke men	

Check (X) competitions (max. 2 individual + max. 2 relay-races), in which you will participate:

WOMEN						MEN						RELAY-RACES		
1	3	5	7	9	11	2	4	6	8	10	12	13	14	15

The competition will take place on October 19, 2019 in the indoor swimming pool MOSiR in Ostrow Mazowiecka. Please register using this form by October 7, 2019.

The application should include the name and surname, year of birth (necessary to create start lists and participants' insurance), membership no. of MOIIB or other OIIB, E-mail and Phone. Within 2 days from the end of registration, we will confirm by e-mail or by phone the acceptance of the application.

The rules of the competition are on [www.maz.piib.org.pl](http://www.maz.piib.org.pl).

If you have any questions or notifications, please contact the MOIIB Field Office in Ostroleka (e-mail: [btostroleka@maz.piib.org.pl](mailto:btostroleka@maz.piib.org.pl), Phone: (+48) 693-933-033).

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Date and place

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Legible signature of the participant