

ATTACHMENT A

Team members

Race:

N.	Surname / Name (capital letters)	Birthdate (gg/mm/aaaa)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Reserves

Drummer _____

Helmsman _____

Captain _____

Crew representative _____

All team participants authorise the processing of their data in accordance with Article 13 of Legislative Decree 196/2003 and Article 13 of EU Regulation 2016/679, as amended.

The Captain will be personally responsible for the entire team regarding the legal provisions related to the sports medical certificate and the aquatic abilities of individual participants.