META Mesterek és Tanítványok Elementary School of Art

97/C Hegedűs Gyula street, Budapest 1133

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E-mail: info@metamuveszetikozpont.com



ENROLLMENT FORM for music education 2023/24

STUDENT'S	NAME:			
NATIONALI	TY:			
PLACE AND	TIME OF BIRTH:			
ADDRESS:				
MOTHER'S	S NAME:			
OM IDENTIF	ICATION NUMBER			
(11-digit numl	ber starting with 7 on the student			
ID card):				
NAME OF SC	CHOOL:			
CLASS (starti	ng from September):			
ADDRESS OF	F SCHOOL:			
LEGAL REPR	RESENTATIVE:			
PHONE:				
E-MAIL:				
		ments, flute (blockflöte f	ase indicate by underlining!) for the little ones), clarinet (blockflö	
<u>DECLARAT</u>	I <u>ON</u> (Please indicate by under	lining!)		
1.	I declare that I have not enrol am paying a support fee in M		te-supported art school from September 1 Elementary School of Art. YES	, 2023, therefore, I / NO
2.	I declare that I have enrolled my child in another art school from September 1, 2023, therefore I will pay tuition fee in META Masters and Disciples Elementary School of Art. YES / NO			
3.	In case of disadvantageous sit documents for verification.	uation, social need, I request	exemption from the tuition fee. I will sub YES	omit the necessary / NO
	Location, date (YYYY-N	 fM-DD)	Signature of legal representati	vve

DECLARATION OF CONSENT FOR DATA PROCESSING

represented by me, recorded on the data sheet attached Fanítványok Alapfokú Művészeti Iskola (META Masters an Budapest 1133; School ID: 200 211) - hereinafter referred	processing of my personal data / the personal data of the minor to this statement and made available to META Mesterek és d Disciples Elementary Art School, 97/C Hegedűs Gyula street, to as the data controller - and to be included in the database of School Foundation, 97/C Hegedűs Gyula street, Budapest 1133) a them until the withdrawal of my consent
- Γhe purpose of data processing is to fulfill the services and o	bligations undertaken by the data controller, to identify the data ta subject, and to provide information via electronic mail. We do
	g any media created of my child during school or art classes, in their website or any other art-promoting platform.
I do not consent to receiving information about futur	re events via email.
Location and date:, 202	23(YYYY-MM-DD)
Signature of declarant (in case of a minor, signature parent, between 14-16 years of age the parent and the	
Name of declarant (in case of a minor, the name of the legal representative):	Name of the represented person:
Address of the declarant (in case of a minor, address of the legal representative):	The address of the represented person:
Before us,	, as witnesses:
Signature:	Signature:
Name:	Name:
Address:	Address:
	1

Data processing information:

The consent is voluntary. We handle personal data confidentially and do not disclose it to third parties outside the circle authorized by the person giving consent to data management. Data processing fully complies with all obligations set forth in Act CXII of 2011 on Informational Self-Determination and Freedom of Information. The place of data processing is 97/C Hegedűs Gyula Street, Budapest 1133. The consent given for the processing of personal data for the above purpose may be withdrawn at any time in person or by mail at the place of data processing, or by a statement sent to info@metamuveszetikozpont.com. The processed data and their scope can be modified, and the removal of published pictures, in full or in part, can be requested. The data subject/legal representative can also request information on the processing of their data, which is available on our website: https://www.metamuveszetikozpont.com/adatvedelem.