



Co-funded by the
Erasmus+ Programme
of the European Union



I, _____, in my capacity as mother/father/tutor of
_____ student at the school _____ during the
school year _____, hereby

GIVE MY CONSENT TO

the participation in all the learning and ludic activities within the Erasmus+ Project *Connecting Woods*;

teachers taking my son/daughter to a medical facility in case of medical assistance. In the event of an accident, family member will be informed and consulted by telephone before making any medical decision. In case of vital emergency, and if it is not possible to contact by telephone the parent/tutor responsible for the child, I hereby authorize the teaching staff from our school to make a decision in my name and for the best interest of my son/daughter.

images (photographs and/or videos) of my son/daughter taken/recorded during activities within the framework of the project to be published by :

- Internet platforms not administered by the school, namely
 - Etwinning
 - Partner schools websites as well as local, state and European public institutions (European Commission, National Agencies and local administrations)
 - Corporate website of societies collaborating in the project
 - Magazines and/or other publications edited by the school

materials created by my son/daughter being published in communication spaces such as blogs, websites and magazines in the education domain.

cite my son/daughters name (no surname) in websites, blogs and magazines edited by partner schools or Public institutions involved in the project.

Data protection information

Institutions responsible for data treatment: Sjulnasskolan (Suècia), Lycée Philippe Lamour (França), Institut de Cassà de la Selva.

Objective: Authorization to broadcast image/voice/materials created in the communication and dissemination spaces of the project and the schools.

Consentant: Legal tutor of minor students.

Dissemination: Data will not be communicated to third parties, except in the cases established by the law and only in the terms previously authorised by the tutor.

Rights: Data access, rectification, deletion, treatment refusal and limited treatment.

Signed ,

Place and date