

Registration Form

FNEL asbl.

61a, rue de Trèves • L-2630 Luxembourg
Tél.: 26 480 450 mail@fnel.lu



.....
Surname/Name of new member

.....
Nr, street

.....
Postal code, City

.....
Telephone GSM Telephone office e-mail

.....
Date of birth / social Security Nationality M / F / A Gender

engage as

Beaver (5-7 yrs) Cub (8-11 yrs) Scout (11-13 yrs) Explorer (14-16 yrs) Rover (16-20 yrs) Tembo (from 21 yrs on) Leader (from 16 yrs on)

in the local group

Parent/Guardian Name

Name, Address:

Family relationship:

E-mail: tel. / GSM :

Name, Address :

Family relationship:

E-mail: tel. / GSM :

The undersigned

Surname, Name

- confirms that the member adheres to the statutes of the group and those of the FNEL asbl, as well as to all related regulations.
- authorizes FNEL and the group to use the data provided by this form for their computer files (internal group and federation use only)
- gives his consent as to the fact the registration to a group activity, or a FNEL activity is done via SMS/e-mail where a physical signature of the attendee or its legal representative is not necessary; the sole dispatch of an SMS or an e-mail is sufficient
- has knowledge of the data processing policy of the FNEL, which is indicated on the FNEL website, and gives consent that the personal data of the signee or its legal representative is used in the frame of the purpose described thereon.
- agrees that the photos taken during the Scouting events and on which he/she may appear, can be published by FNEL and the group in the press and for any other non-commercial purpose related to the communication of the federation or Scouts groups.