

Declaration of consent of parent or legal guardian in connection with application for a grant for organised leisure activities

I hereby consent to the Municipal Authority collecting and sharing my child's personal data (personal details) in connection with the application to have expenses related to participation in an organised leisure activity covered.

Child's name:

Date of birth:

Signature of parent or legal guardian:

The application, together with the declaration of consent, shall be submitted to the Nordre Follo public health coordinator.

The Municipal Authority will store the information for one year, or for as long as the purpose exists.

I confirm that this consent is given freely and voluntarily. I am aware that I can withdraw my consent at any time.

Name: _____ Date of
birth: _____

Place: _____ Date: _____

Name of club / association / business from which the information has been collected:

Electronic signature of club / association / service recipient: _____