

# MEMBERSHIP FORM

# FPNETBALL



Complete the form below

## Legal Entity

Full Name :

Full Address :

NIF number :  Date registered:

D D M M Y Y

Type :  Sports Club  Sports Company  Promotion & Events  Other  Specify (if other) :

Contact person :  Designation :

E-Mail :  Phone :

Contact person :  Designation :

E-Mail :  Phone :

Documents required :

- Copy of Statutes and Regulations
- Public Deed of incorporation
- List of legal representatives

- Proof of headquarters and registration in national territory
- Copy of the minutes of the last General Meeting

## Declarations and Consent

Yes  No I agree to comply with the FPN Code of Conduct regulations.

Yes  No We recognise the FPN Arbitral Tribunal and the Court of Arbitration for Sport, as being the competent courts to settle domestic and international disputes under the terms of these Statutes

Yes  No Privacy Information and Informed Consent.

I am aware of the information on the terms under which the FPNetball processes, conserves and protects the personal data of users of its services and equipment, available in writing on request, from the collection of my consent for the purposes that require it, as well as the rights that I may exercise, in accordance with the provisions of Regulation (EU) 2016/679-RGPD-and other applicable national legislation on privacy and data protection.

Yes  No I authorise the communications and marketing through social networks, newsletter websites or any other means of communication from FPN electronically. Opting out will not impact membership.

Yes  No I authorizes FPN to capture photos, images and sound in FPN activities and Services:

- a) for use in multimedia equipment and displays from FPN, Netball Associations and/or Sponsors,
- b) for FPN publications, namely through social networks, institutional website and newsletter.

Yes  No

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Signature of co-applicant  
(if required)

FPN: FEDERAÇÃO PORTUGUESA DE NETBALL

NIPC: 518.570.347

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