



PSV Zwemsporten Declaration of consent

Version 1 September 2019

I declare to have taken note of the **Privacy Statement** and **Rules of Conduct** as published on the PSV Zwemsporten website:

<https://www.psvzwemsporten.nl/privacyverklaring/>

<https://www.psvzwemsporten.nl/gedragsregels/>

For the proper functioning of our association, we would like to inform you about the association, sports activities and offers and such. We also want to publish game schedules, match results and sometimes also photos and videos of performances on which you can be seen. With this form we request your permission to use your data for this.

This form must be submitted to the association or departmental secretary who will take care of the processing in our central member administration Sportlink. If desired, this is also possible via your own trainer or scanned via secretaris@psvzwemsporten.nl.

With this form I,
member number (can be found on your invoice) (further: the undersigned)
give **PSV Zwemsporten** (further: the association) permission to process data about me.

The undersigned authorizes the association to use the data for association activities, in particular:

- ✓ Use my data for the implementation of association activities, including the implementation of lessons and training, participation in and registration of events such as competitions and the publication and storage of registrations, results, statistics and reports.
And the resulting administration in the associated tools that make this possible.
- ✓ Make my contact details available to trainers to be able to exchange training information and to communicate with the undersigned and / or parents/guardians.
- ✓ PSV Swimming Sports may approach me for (sports) activities of third parties, for example of other sports clubs or social service providers.
- ✓ Creating and saving of recordings (photo and film) of association related activities.
- ✓ Placing the undersigned's name in publications of sport performances on (social) media.
- ✓ Medical information provided by the undersigned that is important for the safety and / or health of the undersigned. This is saved by the trainers / instructors and is stored in the lesson plan so that other trainers / instructors have access to this information when taking over training.

I also give the association permission for the data processing ticked below:

YES / NO	Publishing recordings (photos and / or videos) of the undersigned on internal (protected) media - This includes also for example a private facebook group This is about prominent exposure and therefore clearly recognizable from the undersigned
YES / NO	Publishing recordings (photos and / or videos) of the undersigned on external (public) media (newspaper, sports magazine, internet). This is about prominent exposure and therefore clear recognition of the undersigned.
YES / NO	Making name, e-mail and / or telephone number of the undersigned available via protected media to members of their own department, so that other members can approach me for association related matters. - E.g. an email address to be able to travel together to competitions
YES / NO	Add my name and telephone number in the team / group's whatsapp group (The contact between trainer and parent / athlete goes through, among other things, WhatsApp.) - In this case, the manager of the group will explicitly ask the undersigned for the number that may be added, and only add with this number. - The same applies for parents/guardians
YES / NO	The trainer may create and save visual material (photos and / or videos) for training support and this may be saved by the trainer for analysis.
YES / NO	The association may approach me for 25 years after my membership ends. For example a reunion or special event.

My permission only applies to the reasons, data and organizations checked and described above. For new data processing, the association asks me again for permission.

I can change my permission at any time by submitting a new form (<https://www.psvzwemsporten.nl/avg/>). The new permission takes effect after processing, at the latest one week after the moment of receipt.

Name

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Date of birth

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Date

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Signature

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NOTE: If the undersigned is younger than 18 at the time of signing, this statement must also be signed by a parent or guardian.

Name parent/guardian

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Signature parent/guardian (if member under 18 years of age)

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