



# REHAB LATARJET

*lights and shadows*

Seraphicum Auditorium  
Rome, 23 October 2010  
**Time: 3.00 - 5.30 pm**

## FREE COURSE RESERVATION REQUIRED

**THE FORM MUST BE FILLED OUT AND SENT BY FAX  
TO THE NUMBER +39 06 83 39 99 25 OR BY EMAIL TO INFO@LASPALLA.IT**

### REGISTRATION FORM

First name _____	Last name _____	
Address _____		
Post (Zip) Code _____	Town _____	Phone _____
e-mail _____		@ _____
Tax code / VAT reg. no. _____		
Date of birth _____	Place of birth _____	
Title _____		
Signature _____	Date _____	
<b>Request for permission to process personal data (Legislative Decree no. 196 of 30/06/03)</b> The undersigned, acknowledging the information contained in Legislative Decree no. 196 of 30/06/03, pursuant to Article 9 of said Legislative Decree consents to the processing of his/her personal data, thereby permitting the formalization of mutual contractual and economics relations, as well as the management of informational, organizational and commercial communications. The undersigned may, at any time, exercise the right specified in Article 18, including the right to object to the processing of his/her data for the purposes envisaged or request that they be modified or deleted.		
Signature _____	Date _____	