Appendix no. 2

………………………….

(date)

**Declaration of the Candidate / Participant regarding the Acceptance of the Regulations of the Summer School**

**"TUL Study Camp"**

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Name and Surname of the Candidate / Participant

I declare that I have read the Regulations of the Summer School "TUL Study Camp"

and I accept them, and the data provided by me are true.

According to the Regulations, the Administrator of personal data is Lodz University of Technology with its seat in Łódź, at ul. Żeromskiego 116.

Personal data are collected and processed for the purposes of organizing the TUL Study Camp. The rules of processing your personal data are described in detail in section 7 of the Regulations.

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(handwritten signature of the

Candidate/Participant or legal guardian)