

**Date** 21/04/2022

**Place:** Meliá Luxembourg (1 Park Draï Eechelen, 1499 Luxembourg)

**Participant's Information**

Last Name	
Name	
Company	
Position	
Address	
Zip code / City /Country	
Phone number	
E-mail / Web	

**How do you want to participate in the afterwork:**

Alone /

With/

Name-Last Name	Company	Position	E-mail

-Unless you previously notify the opposite to the Official Spanish Chamber of Commerce in Belgium and Luxembourg, your participation on this activity allows us the use of your image through the pictures taken by the entity in order to publish news and other publications on the web and social media.

- The data indicated here will be used exclusively for purposes related to the event and we will proceed to the destruction of this form once it has been held.

[ ] I confirm that I have been informed of the purpose of the processing data indicated in this document and expressly authorize the Chamber to treat them in relation to the event.

[ ] I want the Chamber to include my information (name, surname and position) in the list of attendees to the event, which will be distributed among all those present in the same.

In ....., date ..... signature(s)

**To be sent to:**

**Mr. Iker Sanz**

**Official Spanish Chamber of Commerce in Belgium and Luxembourg**

Tel. +35 (0)2 661 404 399

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