



KRAJOWA IZBA GOSPODARCZA



APPLICATION FORM on 21.10.2025

"2. DRS seminar"

I hereby register for participation:

1. Name:
2. Company/Organization Name:
3. Position/Function:
4. Email Address:
5. Preferred form of participation:
6. Question to the speakers:

7. I have information about the Seminar from:

Please send your completed application to konferencja@recal.pl

I agree to the processing of my personal data by the Foundation for the Recovery of Aluminium Packaging RECAL with its registered office in Warsaw, Mariensztat 8 (hereinafter referred to as the "RECAL Foundation") for the purpose of participation in the "2. Deposit seminar". Providing data is voluntary. The basis for data processing is my consent. The recipient of the data is the RECAL Foundation. I have the right to withdraw my consent at any time. Personal data will be processed until the consent is revoked. Subsequent processing of personal data will take place in the cases and for the time required by applicable law and during the periods of limitation periods for claims related to participation in the Seminar I have the right to request the administrator to access my personal data, rectify it, delete it or limit its processing, as well as the right to lodge a complaint with the supervisory authority.