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APPLICATION FOR REGISTRATION IN THE LIST OF FOREIGN PROFESSIONALS
 RECOGNIZED BY UFFICIO PER LO SPORT DELLA PRESIDENZA DEL CONSIGLIO DEI MINISTRI
 HELD AT THE COLLEGIO NAZIONALE GUIDE ALPINE ITALIANE FOR THE PROFESSIONS OF
 MOUNTAIN GUIDE, ASPIRANT GUIDE, MOUNTAIN LEADER AND VOLCANO GUIDE

I undersigned

FULL NAME:		
DATE OF BIRTH (DAY/MONTH/YEAR):	PLACE OF BIRTH:	COUNTRY OF BIRTH:
CURRENT NATIONALITY:	NATIONALITY AT BIRTH, IF DIFFERENT:	
RESIDENTIAL ADDRESS (STREET, POSTAL CODE, CITY, COUNTRY):		
E-MAIL ADDRESS:	MOBILE (AREA CODE - PHONE NUMBER):	
⇒ in possession of the Recognition of the professional qualification enabling the exercise of the profession of: <i>(cross the professional title pursuant to Law no.6/1989 profession whose recognition has been obtained)</i>		
<input type="checkbox"/> IFMGA Mountain Guide <input type="checkbox"/> Aspirant Guide <input type="checkbox"/> Mountain Leader <input type="checkbox"/> Volcano Guide		
⇒ aware of the penalties applicable in the case of false statements, creation or use of false documents, pursuant to article 76 of Italian Presidential Decree no.445/2000 and aware of the loss of any benefits resulting from resolutions made on the basis of false statements, pursuant to article 75 of Italian Presidential Decree no.445/2000, under my responsibility, I declare:		
<input checked="" type="checkbox"/> that I am not established in any Italian region <input checked="" type="checkbox"/> that i have not received criminal convictions and not to be the recipient of measures that concern the application of security measures and prevention measures <input checked="" type="checkbox"/> that I am not aware of being subjected to criminal proceedings <input checked="" type="checkbox"/> that I am in compliance with the professional update <input checked="" type="checkbox"/> that I will promptly communicate any variation of the above data <input checked="" type="checkbox"/> that I will comply with the General Regulation and the CoNaGAI Board of Directors' resolutions		

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Competent authority coordinator of the Regional Associations



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<p>⇒ ask to be registered in the list of foreign professionals authorized by Ufficio per lo Sport della Presidenza del Consiglio dei Ministri held at the Collegio Nazionale Guide Alpine Italiane</p>		
<p>⇒ attach the following documents, once for the first registration:</p> <ul style="list-style-type: none"> <input type="checkbox"/> copy of recognition of the professional qualification certificate issued by the Ufficio per lo sport della Presidenza del Consiglio dei Ministri <input type="checkbox"/> copy of valid identity document or passport <input type="checkbox"/> digital photograph with a white or close-to-white background, JPEG format with a file size between 150KB - 200KB 		
<p>⇒ attach the following documents, for the first registration and every year for the renewal:</p> <ul style="list-style-type: none"> <input type="checkbox"/> copy of professional card with annual vignette (both sides) issued by _____ <input type="checkbox"/> copy of professional insurance certification for the current year <input type="checkbox"/> receipt of payment of the administrative fees of € 25.00 by bank transfer in the name of Collegio Nazionale Guide Alpine Italiane <p>IBAN: IT 70 X 03069 09606 100000141775 BIC: BCITITMM</p> <p>Purpose of the payment: <i>Surname Name DIRITTI DI SEGRETERIA</i></p>		
PLACE	DATE	SIGNATURE OF THE DECLARANT

<p>INFORMATION ON THE PROCESSING OF PERSONAL DATA</p> <p>The collection of data required by this application form and the taking of your photograph are mandatory for the examination of the application. All personal data concerning you that appear on the application form and/or in attached documents and your photograph will be processed by the Collegio Nazionale Guide Alpine Italiane. These data will be entered and stored in the Co.Na.G.A.I. information system that will be accessible to the competent authorities for carrying out any checks. The Collegio Nazionale Guide Alpine Italiane (Via Errico Petrella 19 - 20124 Milano, www.guidealpine.it, guidealpine@mypec.eu), in the person of the pro-tempore President, is the data controller.</p> <p>You have the right to obtain the communication of the data concerning you and request that the data relating to you that is incorrect are correct and that the data related to you processed illegally be deleted.</p> <p>The Italian national supervisory competent authority on the protection of personal data is the Garante per la protezione dei dati personali (www.garanteprivacy.it).</p> <p>I declare that to the best of my knowledge all particulars supplied by me are correct and complete. I am aware that any false statements involve my application being rejected/annulment and may result in prosecution under the law of the Member State that process the application.</p>		
PLACE	DATE	SIGNATURE OF THE DECLARANT

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