



Ref.: 001/F/SAO

澳門大學
UNIVERSIDADE DE MACAU
UNIVERSITY OF MACAU

Declaration of Consent

For student under the age of 18 to participate in the activity below

I, the undersigned, _____, ID No: _____,
(Full name of parent / guardian) (ID card number of parent / guardian)

am the [] Parent / [] Guardian of student, _____, student ID no. _____.
(Please check the appropriate box) (Student's full name)

I hereby declare that I have read and understood the attached Schedule of this activity and I give my consent for this student to participate in

_____ on _____,
(Name of the activity) (Activity date)

which is organized or arranged by the University of Macau (UM).

Moreover, I declare to agree that UM shall not be responsible for any damages caused by the actions of this student if he/she fails to comply with the schedule of the UM, or during his/her free time.

Personal Data Collection Statement
• The University of Macau being a public institution of higher education as set in Law No. 1/2006, will process the personal data collected on this form for activity organization, service providing and contact purposes.
• Due to the needs of the activity or service, the personal data on this form may be transferred to other organizations in Macao.
• The applicants have the right to access, rectify or update their personal data stored at UM.

_____ on _____/_____/_____,
(Signature of parent / guardian) (Date of signature: DD/MM/YYYY)



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Schedule of the activity: