



POLISH
TOURIST
ORGANISATION

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FAM TRIP TO WROCŁAW – registration

Company Name*:

Destinations operated by the company*:

Full name according to the passport*:

Position*:

Pass/Id number*:

Birthdate*:

Mobile number*:

Email address*:

Special diet/allergy*?

Emergency Contact Information*

Name:

Phone:

E-mail:

Your Signature:

Date:.....

Please return this form to Polish Tourist Organisation on 21 August at the latest. Contact person: **Monika Pawlowska**, mp@polen.travel

*☐ "I agree to convert my personal information for the PRESS trip process to the Polish Act "The Protection of persona information" of August 29, 1997, Dz.U. (Journal of Laws) of 2012, No.101, item 926, as amended".

*Required fields