

Registration form "LEARN TO HEAR"

Contact

First Name: _____

Second Name: _____

E-Mail: _____

With my signature, I accept the conditions of the "LEARN TO HEAR" competition as presented on the website and have taken note of the data protection information, in particular point 4.4 competitions (<https://www.mdw.ac.at/datenschutz/datenschutzhinformation-der-mdw/#Wettbewerbe>).

Place, date

Signature