Contact information collection form to update data subject on John Cabot University initiatives

I, the undersigned, having read the information regarding the protection of personal data, wish to	
receive - via email, via SMS and/or by phone - information on the initiatives and events organized	
by John Cabot University	T
Last name*	Name*
City	Country
Email*	Telephone
Current/Last attended school	Year of High School Diploma
Date of birth	Academic interests
For underage students it is necessary to provide a contact address of those who exercise parental responsibility	
in order to inform them of the request made by their son/daughter	
Email or telephone number of the parent or the person who exercises parental responsibility *	
(mandatory for minors)	
Sign here to confirm that you have read the Information referred to in articles 13 and 14 of the EU	
Regulation 2016/679	