

PARENT/GUARDIAN CONSENT FORM
FOR INDEPENDENT USE OF THE "SMOK FAŁĘCKI" PLAY
AREA

(Solvay Park Shopping Center, Kraków, ul. Zakopiańska 105/0/01A)

PERIOD OF VALIDITY OF THE CONSENT (consent can be revoked at any time)

Start and end date of the consent validity

Parent/guardian's full name (print in CAPITAL LETTERS)

Address (print in CAPITAL LETTERS)

Phone number

Child's full name (print in CAPITAL LETTERS)

Child's date of birth

I hereby declare that:

- I am the legal guardian of the aforementioned child and consent to their independent stay and use of all attractions at Smok Fałęcki.
- **I am aware that the staff of Smok Fałęcki does not provide full supervision of the child, and leaving them unattended is at my own risk and responsibility.**
- During the child's stay, I will remain available at the above phone number and will promptly pick up the child if required.
- There are no contraindications, including health-related, to the aforementioned child using the attractions of the play area.

Appendix No. 3 to the Terms and Conditions

● I have read and accept the General Terms and Conditions for Use of the 'Smok Fałęcki' Play Area, and I have familiarized the aforementioned child with its key provisions.

PLEASE MARK YOUR CHOICE:

- ☐ The child is **allowed** to leave the play area independently.
- ☐ The child is **not allowed** to leave the play area independently and can only be picked up by _____

Information on the processing of personal data is included in Attachment No. 3 to the Regulations.

Date and Signature _____

MARKETING CONSENT

I would like to receive commercial information about the activities, promotions, products, and services of Smok Fałęcki, operated by MD Space Sp. z o.o. based in Kraków. Please send messages to the following email address:

_____@_____

Information on the processing of personal data is included in Attachment No. 3 to the Regulations.

Date
Signature