**TEST DAY PHOTOGRAPH AUTHORISATION FORM**

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| **Exams Catalunya - Exams Balears - Exams Andorra**  Cambridge English Exam Centres ES439 Catalunya - ES449 Balears – AD439 Andorra  Freixa, 5-9 08021 Barcelona  Tel: 934 111 333  E-mail: [info@exams-catalunya.com](file:///C:\Users\Fran\Desktop\FORMULARIOS%20COVID%20Y%20TEST%20DAY%20PHOTO\SIN%20MODIFICAR\info@exams-catalunya.com)  For candidates under 18 years of age. This form must be completed and signed by the candidate’s parent/guardian and scanned and sent to us by email to [info@exams-catalunya](mailto:info@exams-catalunya).com or by post to Exams Catalunya. Freixa, 5-9, 08021 Barcelona. | | | | | | | | | | | | | | | | |
| **Exam details:** | | | | |  | | | | |  |  | | | | | |
|  | | | | |  | | | | |  | **Number:** | | | | | |
| Which exam do you wish to take? | | | | |  | | | | | | | | |  | | |
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| B2 First | | | |  |  | | | | | | | | | |  | |
| C1 Advanced | | | |  |  | | | | | | | | | |  | |
| C2 Proficiency | | | |  |  | | | | | | | | | |  | |
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| Which date do you want to take the exam? *(dd/mm/aaaa)* | | | | |  | | | | | | |  | | | | |
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| **Your details:** | | |  | |  | | | | | |  | | | | | |
| First name: | |  | | | Family Name(s): | | |  | | | | | | | | |
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| Date of Birth: | |  | | | Gender: | | | Male | | | | | Female | | | |
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| Email address: | |  | | | | |  | | | |  | | | | | |
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| Telephone: | |  | | |  | | | |  | | | | | | | |
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| Address: | |  | | | City/town: | | | |  | | | | | | | |
|  | |  | | | Post/zip code: | | | |  | | | | | | | |
|  | |  | | | Country: | | | |  | | | | | | | |
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| **Declaration:**  I am the parent/legal guardian of the candidate named on this form and I give my consent to this person to take the Cambridge English exam.  I understand that all individuals who want to take B2 First, C1 Advanced and C2 Proficiency are required to agree to all of the Terms and Conditions (a copy of which has been provided by the centre).  I confirm that I have carefully reviewed the Terms and Conditions, including but not limited to, the provision of a valid photo ID for the exam day and that a photo will be taken of the candidate on the day of the test and will be stored on Cambridge English’s secure Results Verification website. I understand and accept that the photo shall only be available to organisations/individuals that the candidate gives their details to. I consent that these organisations/individuals can use these details to verify the candidate’s examination results.  By signing this form I consent to and agree that the candidate listed on this form will comply with all the Terms and Conditions of the Cambridge English exam at this centre. | | | | | | | | | | | | | | | | |
| **Consent**  I declare that I have been fully informed of the Privacy Policy set out on the website [www.exam-catalunya.com](http://www.exam-catalunya.com/) (Política de Privacidad) which outlines basic data protection information as well as additional information regarding the aims and conditions of use. I hereby give my express consent for my data to be used in accordance with the above said Privacy Policy. | | | | | | | | | | | | | | | |  |
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| Signature: |  | | | | | Date: | | |  | | | | | | | |