

REGISTRATION for LANGUAGE COURSE

Course type

- group one-to-one small group (2 persons)

Type of lessons

- face-to face video conference

Type of contract

- training package (from 10 appointments) contract (minimum duration 3 months)

amount: _____

course units:

- 60 Min 90 Min

- 60 Min 90 Min

Language / language level: _____

(e.g. German – English – French – Italian – Russian – Arabic – Chinese / level A1, A2, B2 etc.)

Day / Time: _____

First lesson: _____

Would you like lessons at your location? Yes No

(plus travel expenses)

Participant:

First name and last name: _____

Street / Postal code / City: _____

Telephone and mobile phone: _____

E-mail: _____

Please note: your contact data (name, e-mail, phone number) can be forwarded to our trainers and other course participants in order to make appointments and discuss course contents. Please find further privacy notices on our homepage: www.sprachenstudiokast.de/kontakt/datenschutz.

By signing this document you confirm that you have read and accepted the terms and conditions of SprachenStudio KAST: www.sprachenstudiokast.de/sprachkurse-mehr/agb-widerruf & www.sprachenstudiokast.de/für-firmen/agb

Location, date

Signature

Company stamp

Declaration of consent

The personal data provided, notably name, address, e-mail and phone number, which are necessary for the realization of the contractual relationship between you and SprachenStudio KAST, are collected based on legal entitlements / authority.

We would like to occasionally **inform you about our offers**, ask you for a **review of our performances** and **contact you via WhatsApp**. However, any use of personal data exceeding the contractual relationship and collecting additional information requires regular consent of the person concerned. Below you can give us your consent on voluntary basis.

You are free to partly or completely revoke your given consent referring to the future any time without providing reasons. The revocation can be done mail, e-mail or fax to SprachenStudio KAST.

Please mark with a cross if you agree with the following purposes of use. If you intend not to give your consent, you can cross out the respective paragraph.

Declaration consent for use of data for further purposes

First name: _____

Last name: _____

Please mark with a cross:

Yes, I give my consent that SprachenStudio is allowed to send me information and offers for other language courses via e-mail, phone, mail or fax* (*at consent please cross out as appropriate)

Yes, I give my consent that SprachenStudio KAST is allowed to send me an inquiry for a review and an evaluation of our services for purposes of analyzing customer satisfaction via e-mail, phone, mail or fax* (*at consent please cross out as appropriate)

Yes, I give my consent that SprachenStudio KAST processes my personal data (e.g. name, phone number, e-mail address, address, customer number) for the communication concerning the preparation, execution and accounting of services by using the messaging provider "WhatsApp" of WhatsApp Ireland Limited, 4 Grand Canal Square, Grand Canal Harbour, Dublin 2, Ireland. I am aware that WhatsApp, Inc. receives personal data (particularly meta data of the communication) that are also processed in countries outside of the EU (e.g. the USA). WhatsApp forwards this data to other companies inside and outside of the Facebook company group. Further information can be found in the privacy policy of WhatsApp (<https://www.whatsapp.com/legal/#privacy-policy>). SprachenStudio KAST has neither knowledge of nor influence on the data processing of WhatsApp, Inc.

No, I do not give my consent to any of the above.

Place, Date

Signature

Issuing a SEPA direct debit mandate for recurring or one-time payments

SprachenStudio Kast
Hinterm Dorf 36
76199 Karlsruhe

Creditor identification number:

DE65ZZZ00002207586

Mandate reference:

Customer number:

(will be filled in by SprachenStudio KAST)

Name, First name

Street / House number / Postcode / Place / Country

IBAN / BIC / Credit Institution

I / We authorize SprachenStudio KAST to collect payments from my / our (business) account by direct debit. At the same time, I / we instruct my / our bank to redeem the direct debits drawn from my company SprachenStudio KAST on my / our account.

Note: This direct debit mandate is only for the collection of direct debits that have been drawn into company accounts. I am / we are not entitled to request a refund of the debited amount after redemption. I am / we are entitled to instruct my credit institution not to redeem direct debits by the due date.

Place, Date

Signature

The right to revocation for user (§ 355 BGB) is by operation of law valid for contracts which are signed outside of business premises as well as for distance contracts (§ 312g Abs. 1 BGB).

Instructions on withdrawal (services) & withdrawal form

Consumers have the right to revocation according to the following, a consumer being every physical person who concludes a legal transaction for a purpose that cannot be attributed to is commercial or independent professional activities.

A. Instructions on withdrawal (services)

Right of withdrawal

You have the right to withdraw from this contract within 14 days without giving any reason.

The withdrawal period will expire after 14 days from the day of the conclusion of the contract.

To exercise the right of withdrawal, you must inform us (Ursula Kast, SprachenStudio KAST, Hinterm Dorf 36, 76199 Karlsruhe, Germany, tel.: +49 721-7258127, fax: +49 721-7258126, e-mail: info@sprachenstudiokast.de) of your decision to withdraw from this contract by an unequivocal statement (e.g. a letter sent by post, fax or e-mail). You may use the attached model withdrawal form, but it is not obligatory.

To meet the withdrawal deadline, it is sufficient for you to send your communication concerning your exercise of the right of withdrawal before the withdrawal period has expired.

Effects of withdrawal

If you withdraw from this contract, we shall reimburse to you all payments received from you, including the costs of delivery (with the exception of the supplementary costs resulting from your choice of a type of delivery other than the least expensive type of standard delivery offered by us), without undue delay and in any event not later than 14 days from the day on which we are informed about your decision to withdraw from this contract. We will carry out such reimbursement using the same means of payment as you used for the initial transaction, unless you have expressly agreed otherwise; in any event, you will not incur any fees as a result of such reimbursement.

If you requested to begin the performance of services during the withdrawal period, you shall pay us an amount which is in proportion to what has been provided until you have communicated us your withdrawal from this contract, in comparison with the full coverage of the contract.

B. Model withdrawal form

Complete and return this form only if you wish to withdraw from the contract.

To

Ursula Kast

SprachenStudio KAST

Hinterm Dorf 36

76199 Karlsruhe

Germany

fax: +49 721-7258126

e-mail: info@sprachenstudiokast.de

I/We (*) hereby give notice that I/We (*) withdraw from my/our (*) contract of sale of the following goods (*)/for the provision of the following service (*)

Ordered on (*) _____ /received on (*) _____

Name of consumer(s)

Address of consumer(s)

Signature of consumer(s) (only if this form is notified on paper)

Date

(*) Delete as appropriate