INFORMATIVE FOR FOR TOURISTIC STRUCTURES

# General data

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name | | |  | | | | | | VAT | |
| Address | | |  | | | | | | | |
| ZIP Code |  | Town |  | | | | Country | | |  |
| Tel. |  | | Fax |  | Cell. |  | | | | |
| Picture | | ***Send picture in jpg at: ecoturismo@icea.info*** | | | Website  Email | | |  | | |

**Legal representative**

|  |
| --- |
| Name and surname |

**Contact person**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name and Surname | Position | Tel. | Cell. | email |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**2. Type of structure**

|  |  |  |
| --- | --- | --- |
| Hotel | Community distributed hotel | Agritourism |
| Bed&Breakfast | Camping | Other (specify): ……….. |

# Position

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Mountain | Hill | Plain | On the sea | On a lake | On a river |

|  |  |
| --- | --- |
| Opening period | All year-round |
|  | Seasonal:  From …………………. to……………………..  From …………………..to ……………………. |
|  | Only weekends |

# Hospitality

1. **Flats**:

|  |  |  |
| --- | --- | --- |
| **Flat**  ***(number)*** | **Beds**  ***(number)*** | **Price** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Rooms**:

|  |  |  |  |
| --- | --- | --- | --- |
| **Room**  ***(number)*** | **Beds**  ***(number)*** | **Room with bathroom** | **Price**  ***(per person)*** |
|  |  | Yes  No |  |
|  |  | Yes  No |  |
|  |  | Yes  No |  |
|  |  | Yes  No |  |

1. **Agricamping** Yes  No

|  |  |  |
| --- | --- | --- |
| n° of position available for tents: …….. |  | n° of position available for campers: …….. |

# Prices

|  |  |  |
| --- | --- | --- |
| **Bed & Breakfast**  ***(€/person)*** | **Half board**  ***(€/person)*** | **Restaurant – average price**  ***(€/person)*** |
|  |  |  |

# Facilities for children

|  |  |  |
| --- | --- | --- |
| Playing park | Changing table | Cradle / Child bed |
| Bathtub for children | High chair | Internal phone |
| Other:………………………… | Other:………………………… | Other:………………………… |

# Facilities for physically challenged persons

|  |  |  |
| --- | --- | --- |
| Rooms with no stairs | Facilitate access to community used areas (ex. restaurant or reading room) | Dedicated bathroom |
| Other:………………………… | Other:………………………… | Other:………………………… |

# Prohibition

Are not accepted:

smokers  animals  Other (specify): ……………………

# Own sale products (for agritourism)

Main farm products: ………………………………………………………………………………..

………………………………………………………………………………..

|  |  |
| --- | --- |
| * Does the farm offer tasting of typical products? | YES  NO  |
| * Does the farm offer direct sale of fresh or processed products? | YES  NO  |

# Main services offered to hosts

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Write down a short overview of the main three services offered by the operator (for ex.: sports, on farm educational activities, tasting events, etc.)    |  |  |  | | --- | --- | --- | | Family tourism | yes | no | | Structures for physically challenged | yes | no | | Nature discover | yes | no | | Didactic farm | yes | no | | Sport | yes | no | | Wellness | yes | no | | Wine tourism | yes | no | | Horse riding tourism | yes | no | | Biking tourism | yes | no | | Animal friends | yes | no | |

# Near by

|  |
| --- |
| *Write down main attractions that are near the facility (for ex. historical, artistic and archeological sites, environmental protected areas, etc.), indicating for each one the distance from the facility* |

# To sum it up...

|  |
| --- |
| *Visit us because…….* |

# How to reach us

|  |
| --- |
| From South and North, starting from the nearest highway exit |

# Personnel qualifications

The owner, a family member or other employees inside the firm has a good knowledge of one or more of the following languages

|  |  |  |
| --- | --- | --- |
| English  | French  | German  |
| Spanish  | Other (indicate)  |  |
|  | | |

The owner, a family member or other employees inside the firm has one or more of the following qualifications:

|  |  |  |
| --- | --- | --- |
| Environmental guide  | Touristic guide  | Cook  |
| Enologist or sommelier  | Olive oil taster  | Other (indicate)  |
|  | | |

|  |
| --- |
| INFORMATIVE DECLARATION ACCORDING TO ART. 10 OF LAW N. 675 OF 31 DICEMBRE 1996 (PROTECTION OF PERSONS AND OTHER SUBJECTS REGARDING TREATMENT OF PERSONAL DATA)  According to art. 10 of law n. 675/96 regarding protection of personal data, the Istituto per la Certificazione Etica ed Ambientale (here as follows named ICEA) with legal address in Bologna (italy), Via Nazario Sauro 2, as Entitled Body of receiving the owner personal data, is due to give the following info regarding the use of the mentioned data:  Aim of treatment  Personal data are treated within normal ICEA activity with the following scopes:   * scopes related with legal obligations, with standards and EC regulations, together with compulsory disposition given by an authority through a surveillance and control body ; * scopes strictly connected and needed for the management of relationship with operators (such as invoices issuance) ; * scopes related to ICEA activities (such as collecting of data for statistical use) ; * promotion of operator products ; * taking care of public relations  Treatment of the data In relation to the indicated scopes, treatment of personal data takes place through manual and informatics tools, in a way strictly related to scopes and anyway guaranteeing safety and confidentiality of mentioned data. Communication and diffusion of the data Within this treatment, personal members data could be communicated to:   * Research Institutes, Universities, Schools * Ministries, Regions, Townships * Commercial operators * Subjects in charge of management of payment/collection, here included banks and financial bodies  Rights as per art. 13 The art. 13 of the Law give citizens specific rights. In particular, the interested party can obtain by the Entitled Body confirmation of the existence of its own personal data. The interested party can also ask the origin of the data and obtain their cancellation, their transformation in anonymous form or their updating.  The agreement to ICEA treatment of the data of the interested party is facultative (excluded in cases compulsory by law), but this can harm the above mentioned scopes.  ICEA will take care to avoid divulgation of data that can disclose the ethnic origin, the religious and philosophic views, the pertaining to political parties, syndicates, associations and organizations with religious, philosophic, and political character, together with data related to health status and sexual orientation. DECLARATION OF ASSENTI, the under written\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_living in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ n. \_\_\_\_\_\_\_\_ Legal representative of the company\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  with offices in Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ n. \_\_\_\_\_\_\_\_ town\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  according to art. 10, 11, 20 of Law n. 675/1996. DECLARE  1. that I received written copy of the informative declaration as per art. 10 of Law 675/1996 2. to give my assent to personal data treatment included in the registration form for the scopes and according to the standards in the informative declaration, and to their communication to subjects and according to norms herby specified.   Date and place\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Stamp and signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |