

General Protection Data Regulation – Right to Exercise

Full Name :.....

Identity Card No./Passport :

Telephone Number :.....

Email :

Which right do you wish to exercise:

- Right to access Data
- Right to Correct Data
- Right to Restrict Processing of Data
- Right to Oppose Use of Data
- Right to Delete Data
- Right of Data Portability
- Right to Reject Automated Processing of Data

Kindly give exact and detailed description of your request:

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I wish to receive the above via:

- Fax
- Written Correspondence

The Request Refers to:

- Myself
- Dependant Minor

Signature

Full Name.....

Date.....