

Specific Consent Form

	, confirm I am over the ag personal or sensitive data being processed for the	
What data		
For what spe	cific purpose	
Loonsent to	this data being processed from the date given belo	w until
(date)		
If consent is needed for a further purpose or timeframe, we are required to gain additional specific consent to do so.		
Please note: If you wish to remove this consent please contact the Association for a withdrawal form, in order for any processing to be stopped immediately.		
Name:		
Address:		
Signature:		Date: