

Subject Access Request Form

Please complete this form (in writing) in **BLOCK** capitals and post, enclosing the relevant information, to:

Data Security Compliance Manager
 Experience Freedom
 East Grinstead House
 East Grinstead
 West Sussex
 RH19 1UA

For Head Office Use Only	
Reference:	
Date received by DSCM:	
Date ID checked:	
Date completed:	

Please note that the information supplied to Experience Freedom in this request will be used to administer this request for the purposes registered by The Caravan Club Limited, the data controller, with the Information Commissioner's Office under reference Z5851331.

Section 1

Details of the Data Subject (to whom the information relates)

Tick box as appropriate:

Mr Mrs Miss Ms Other _____

Surname/family name:		
Maiden/former name(s): <i>(if applicable)</i>		
First name(s):		
Gender: <i>(tick box as appropriate)</i>	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Residential address: <i>This must <u>not</u> be a PO Box address. This address is where the requested information will be sent unless an alternative delivery address is explicitly stated at the time of the application.</i>	Current address <i>(if residing at this address for less than two years, please also provide your previous address).</i>	Previous address <i>(if required)</i>
	_____ _____ _____ Town: _____ County: _____ Postcode: _____	_____ _____ _____ Town: _____ County: _____ Postcode: _____
*Primary contact telephone number:		
*Email address:		

*These are not mandatory but will be helpful in case you need to be contacted

Section 2

Request for information

Please describe the information you require in as much detail as possible in order for us to locate it for you.

Section 3

Proof of identity

To help establish your identity, your application must be accompanied by copies of at least **two** different official documents. Between them, these documents should provide sufficient information to verify **your name, current address and signature**. Examples of such documents are: passport, driving license, birth/adoption certificate, latest council tax bill, a recent utility bill, income tax notification from HM Revenue & Customs, National Identity Card (non-UK nationals), bank statement and NHS medical card.

Experience Freedom reserves the right to ask for original documentation in some cases. All original documents will be returned by post.

This is a PUBLIC document and can be distributed externally but will be classified as RESTRICTED when complete

Section 4

Fee

A cheque or postal order in the sum of £10 and made payable to *The Caravan Club Limited* is required to process your request. Please write your name and full address on the back of the payment in BLOCK CAPITALS.

Section 5

Third party application and declaration *(if applicable)*

If you are acting on behalf of the Data Subject, whose information is listed in Section 1, you must complete this section with your details and also attach a signed letter of authority from the Data Subject. You must also ensure that the Data Subject has signed this application form at Section 6 and provided their identification documents in accordance with Section 3 above.

Tick box as appropriate:

Mr Mrs Miss Ms Other _____

Full name:	
Gender: <i>(tick box as appropriate)</i>	<input type="checkbox"/> Male <input type="checkbox"/> Female
Residential address: <i>Please include postcode.</i>	
*Primary contact telephone number:	
*Email address:	

**These are not mandatory but will be helpful in case you need to be contacted*

Declaration of third party:

I confirm that I am acting on behalf of the Data Subject and attach an appropriate letter of authority from the Data Subject and the required proofs of identity as set out in Section 3.

Signed: _____

Date: _____

Section 6

Data Subject declaration

I confirm that the information provided on this application is accurate and true at the time of this request and I am the person to whom the information in Section 1 relates.

I understand that it is necessary for Experience Freedom to confirm my identity and that it may be necessary for Experience Freedom to obtain more detailed information from me in order to locate the information I have requested.

I confirm that I am seeking access to personal information about myself in accordance with this request.

Signed: _____

Date: _____

Time limit for responding

As soon as you have (a) supplied sufficient information, (b) your cheque or postal order has been received, and (c) your application is confirmed as valid, Experience Freedom will gather the information you require and respond to your request as soon as possible and within no more than 40 calendar days.

Redaction of data

In order to comply with the Data Protection Act 1998, Experience Freedom may be required to redact (withhold, suppress or obscure) certain information from the documentation that is sent to you. This could be because disclosure of the information would breach confidentiality of another individual from whom Experience Freedom has not sought or had permission from to disclose this information to you, or because of the nature of the information or the effect its disclosure is likely to have.

Returning the form

This completed form, proofs of identity, fee (and letter of authority if a third party is applying on the Data Subject's behalf), should be sent by post to:

Data Security Compliance Manager
Experience Freedom
East Grinstead House
East Grinstead
West Sussex
RH19 1UA

If you have any questions about this process, please contact the Data Security Compliance Manager (above) in writing.