

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

Data Protection Officer Experience Freedom East Grinstead House East Grinstead West Sussex RH19 1UA

Tick box as appropriate:

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

Please note that the information supplied to Experience Freedom in this request will be used to administer this request in line with our Privacy Policy located on our website at https://experiencefreedom.co.uk/privacy-policy/

Section 1 Details of the Data Subject (to whom the information relates)

□ Mr □ Mrs □ Miss □ Ms □ Other _____

number:

Email address:

(if applicable)

Membership Number

Surname/family name:		
First name(s):		
Residential address:	Current address (if residing at this address for less than two years, please also provide your previous address).	Previous address (if required)
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.	Town:	Town:
	County:	County:
	Postcode:	Postcode:
Primary contact telephone		

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

Version 2.1 Page **1** of **4**



Section 2 Details of your request Please describe which data subject right(s) you would like to exercise, providing as much detail as possible in order for us to locate your information and manage your request.			
Please let us know why you are making this request (You do not have to provide this information, but it may help us to locate the information you require)			



Section 3

Proof of identity

In order for us to locate your information and manage your request we need to fully verify your identity. To help us do this, please tick the relevant boxes to indicate the items that are enclosed. Your request must be accompanied by copies of at least **two** of the following document types:

Driving licence			
Passport			
Marriage certificate			
Utility bill (not more than six mo	onths old and excluding internet or mobile phone bills)		
Council Tax statement (current y	/ear)		
Bank account statement (not me	ore than six months old)		
Landline telephone bill (not mor	re than six months old)		
Experience Freedom reserve will be returned by secure co	s the right to ask for original documentation in some cases. All orig urier.	ginal documents	
Section 4 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 5 and provided their identification documents in accordance with Section 3 above.			
Tick box as appropriate:			
□ Mr □ Mrs □ Miss □ M	s 🗆 Other		
Full name:			
Correspondence address: Please include postcode.			
Primary contact telephone number:			
Email address:			

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

Version 2.1 Page **3** of **4**



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 5	
Data Subject declaration	
I confirm that the information provided on this application is accurate and am the person to whom the information in Section 1 relates.	true at the time of this request and I
I understand that it is necessary for Experience Freedom to confirm my ic for Experience Freedom to obtain more detailed information from me in o requested.	·
Signed:	
Date:	

Time limit for responding

As soon as you have (a) supplied sufficient information, and (b) your application is confirmed as valid, Experience Freedom will process your request and respond to you as soon as possible and in any event within one month.

Redaction of data

In order to comply with UK data protection law, 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 and proofs of identity (and letter of authority if a third party is applying on the Data Subject's behalf), should be sent by post to:

Data Protection Officer Experience Freedom East Grinstead House East Grinstead West Sussex RH19 1UA

If you have any questions about this process, please contact the Data Protection Officer (above) in writing or by emailing DPO@camc.com

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

Version 2.1 Page 4 of 4