

Personal Information Privacy Consent Form

For Members of

The Ottawa Naturists/Naturistes de l'Outaouais (ON/NO)

The ON/NO Personal Privacy Policy is attached. Please read it, fill in the information requested below, and then sign.

I _____
(Please print your name above here)

Hereby, give permission to ON/NO to collect and retain the required personal information as provided by me in printed form, and in the electronic database for the purposes outlined in the ON/NO Personal Privacy Policy which I have read. I understand that I may withdraw my consent at any time upon written notice to the ON/NO Board of Directors. The withdrawal of consent will terminate my membership and privileges in ON/NO. Printed personal material and electronic information will then be removed from the active files and archived for a period of six (6) years, at which time it will be purged.

Post mail address _____

Telephone Number _____

Email address (Optional) _____

Signature _____

Date (day/month/year) _____

This form is to be kept on file until such time as consent is withdrawn or the person ceases to be a member of ON/NO.