

DATA SUBJECT REQUEST FORM

This form is used to make a request under the General Data Protection Regulation for your personal data that is held by Covers Media Group Limited.

Answer the questions below to help us to process your request.

1. ABOUT YOU

Title:
Name:
Address:
Town/City:
Area code:
Country:
Contact phone number:
Email address:
In case we have a query about your request, how would you like us to contact you? (tick one) By email By post By phone

2. FURTHER DETAILS

Are you the data subject?
<input type="checkbox"/> Yes, I am the data subject (we will ask you to confirm your identity)
<input type="checkbox"/> No, I am acting on behalf of the data subject with their express permission, or with the appropriate legal authority (we will ask for a letter of authority).
How are you exercising these rights? (tick one) Customer Employee/Contractor Other:

3. THE REQUEST

What information do you request?	
When did you supply information to Covers Media Group Limited? (Approximate dates will help us)	
If you would like to limit your requests to certain dates/categories, please specify:	

4. NEXT STEPS

Please send a copy of this form to privacy@coversmedia.com and we will respond. We advise that you retain a copy of this form for your own records.