

Library Card Application and GDPR Consent Form

ID number (filled in by the library)

Last Name:		First Name:	
Date of Birth:		Address:	
ZIP Code:	_ (City:	
Phone:		E-Mail:	
☐ Adult☐ Reduced (e.g. students)☐ eMedia only	20 € 10 € 10 €	☐ d.a.i. members ☐ Pupils ☐ Trial card	free free free
,		\square Cooperation card	free
 Upcoming end of the lending for the following newslette. You have the right to revoke your consent to. For children under 14 years of age: I agree with the above application of the rules for library use and scale of the rules. 	rs: Eve the use of your e-m (to be complet of my child and	ents □Library □Teacher Info ail address at any time. ed by the legal parent/guardian will be liable for complying wi	n) th the regulations of
of fees.		· N.	
	F	First Name:	
Date of Birth:	f Birth: Address:		
ZIP Code: City:			
Phone:	E-Mail:		
Protecting your personal data is our special comission to third parties takes place only for upon the general rights of disclosure, correction, docessing of your personal data due to reasons. A agree to comply with the regulation d.a.i. in their current version. I consensabovementioned purposes. I consentation membership. Note: We will only use you datenschutz).	se of our online ser- eletion, restriction, a resulting from your as of the rules of t to the automat to the processing	vices such as the online catalogue, ebood and objection. You have the right to object to object to be particular situation. Iibrary use and the scale of fees of ic storage and processing of my of my data for the purpose of r	oksusa (e-lending). You have ect at any time to the pro- of the library of the data to fulfill the managing my library
Place, Date	– — Signa	ture (under 14 yrs.: Parent / G	uardian)