

Data Subject Access Request Form

Please fill in the information below. The website administration or data protection officer will be notified of your request within 24 hours and will need an appropriate amount of time to respond.

Website _____

Your Name _____

Email address you use to access the above website _____

You are submitting this request as

The person, or the parent/guardian of the person whose name appears above.

An agent authorized by the consumer to make this request on their behalf.

Under the rights of which law are you making this request?

CCPA

CTDPA

GDPR

UCPA

CPA

VCDPA

Other _____

I am submitting a request to _____

Know what information is being collected from me

Have any information deleted

Opt out of having my data sold to third parties

Opt in to sale of my personal data

Access my personal information

Fix inaccurate information

Receive a copy of my personal information

Opt out of having my data shared for cross-context behavioral advertising

Limit the use and disclosure of my sensitive personal information

Other (please specify in the comment box below)

I confirm that

Under penalty or perjury, I declare all the above information to be true and accurate.

I understand that the deletion of my personal data is irreversible and may result in the termination of services.

I understand that I will be required to validate my request by email, and I may be contacted in order to complete the request.

Signature

Date
