**Appendix C - Data Deletion Request Form**

*Under the General Data Protection Regulation (GDPR), you have the right to have your data deleted where there is no compelling reason for it to be retained. You may use this form to request that your data is deleted. The process to deal with a DSAR is contained within the SAMS Membership GDPR Privacy Notice.]*

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| --- | --- |
| **Personal details** | |
| Your name: |  |
| Your membership number: |  |
| Telephone number: |  |
| Email address: |  |
| Home address: |  |
| **Data you wish to be deleted** | |
| Please use the space below to describe, in as much detail as possible, the data which you wish to be deleted | |
| **Reason for request** | |
| Please indicate below which of the reasons set out above applies to your request | |
| I confirm that I am the SAMS Member named above and the information requested above is in relation to me. I understand that I may be required to provide evidence to verify my identity. | |
| **Your signature:** |  |
| **Date:** |  |