

Data Protection Manager
 IT Governance – FSE
 Virgin Atlantic Airways Ltd
 The Office
 Manor Royal
 Crawley RH10 9NU

DATA PROTECTION ACT 1998 CONSENT TO DISCLOSE PERSONAL & SENSITIVE PERSONAL DATA

Please Note - To request a copy of your booking, **ALL** the following information is required:

| | | | |
|---------------------------|----------------------|-------------------------------------|----------------------|
| Customer Name: | <input type="text"/> | | |
| Booking Reference Number: | <input type="text"/> | Flying Club Number (If applicable): | <input type="text"/> |
| Flight Number: | <input type="text"/> | Route of Travel: | <input type="text"/> |
| | | Date of Travel: | <input type="text"/> |

I, the Customer/Customer's Representative, request the following information or, provide my explicit consent for Virgin Atlantic Airways (VAA) to disclose the information below to (Third Party) .

| | |
|------------------|-----------------------------------|
| Customer's Name: | Third Party Name (If Applicable): |
| Address: | Address |
| Post Code: | Post Code: |

INFORMATION REQUESTED

Please tick all boxes that apply:

| | |
|--|--------------------------|
| Copy of Booking | <input type="checkbox"/> |
| Customer Relations correspondence (complaint reference number) | <input type="checkbox"/> |
| Flying Club information | <input type="checkbox"/> |
| Other data source (Please specify) | <input type="checkbox"/> |

Please tick box to confirm you have enclosed your £10 cheque or postal order and photocopied identification with this form .

Please print your full name here:

Please sign your full name here:

Please enter today's date here:

** Please note that under the Data Protection Act Virgin Atlantic Airways are allowed 40 days from receipt to process your request
 ** To comply with the Data Protection Act we are required to redact (withhold) certain information from the documents we send out
 ** Cheques should be made payable to Virgin Atlantic Airways