

1. CONSENT TO RECEIVE INFORMATION

I agree to receive, by the following means, information about NAB's services, social clubs, campaigns, fundraising and other events and activities; as well as information and advice about living with sight loss which may be of interest or benefit:

Correspondence

I AGREE to receive correspondence from NAB

(tick)

Viewpoint Magazine

I AGREE to receive NAB's Viewpoint magazine

2. HOW WOULD YOU LIKE TO HEAR FROM US?

Correspondence (tick)

Email
(HTML)

Email
(Plain text)

Large Print

Viewpoint (tick)

Email
(HTML)

Email
(Plain text)

Large Print

Audio
(USB)

Audio
(CD)

Braille

3. CONSENT TO STORE & USE YOUR PERSONAL INFORMATION

To provide you with the most effective help, advice and support can you please agree to the following:

I agree that NAB can store and:

(tick)

- use my personal information to enable NAB to provide me with the level of service I requested
- share my personal information on a 'need to know' basis with organisations NAB needs to enlist to help provide the agreed service, or who funds that service
- use my personal information, anonymised, to help further the interests of local people living with sight loss

4. YOUR CONTACT DETAILS

Title _____ Name _____

Address _____

_____ Postcode _____

Telephone _____ Mobile _____

Email _____

5. YOUR SIGNATURE

Signature _____ Date _____

NAB will never sell your data. If you would like further information on how your information may be used, how we keep it secure and your right to access the information we hold on you, please:

- ring our Telephone Helpline: 01604 719193 or
- send an email to: helpline@nab.org.uk or
- write or visit us at NAB, Northampton Sight Centre, 37 Harborough Road, Northampton, NN2 7BB

And remember, you can always change your mind about any of the above – just get in touch and we will respect your wishes.

Thank you

Staff Use only

If you have completed this form at the client's request; please name, sign and date below to confirm that you have faithfully recorded their stated preferences:

Name:

Signature:

Date: