

## Membership Registration Form

To comply with the new General Data Protection Regulation (GDPR) the Friends of Derriford Hospital Kidney Unit KPA (FODHKU) requires your consent to be able to communicate with you.

Mr / Mrs / Ms / Miss

D.O.B: .....

First Name: ..... Surname: .....

Address: .....

.....

Email Address: .....  
(if consent given)

Telephone no.: .....  
(if consent given)

I consent to be contacted by:    Email     Post     Telephone

I understand that should I wish to opt out at any time I will inform Friends of Derriford Hospital Kidney Unit KPA, (either by phone or in writing).

I give consent for the above details to be held on FODHKU's secure membership details database to be held under the provisions of the "Data Protection Act 2018", until I should choose to opt out.

I understand that my personal data **will not** be shared with any other third parties other than **National Kidney Federation** (NKF) to whom the KPA is a member, and whose registered address is National Kidney Federation, Unit 10, The Point, Coach Road, Shireoaks, Worksop, Notts, S81 8BW for the purpose of receiving their free Kidney Life magazine and other communications

Please send the completed form to: Friends of Derriford Hospital Kidney Unit, 22 Sparke Close, Plympton, Plymouth, Devon, PL7 2YA. Or electronically to [fodhku.general@gmail.com](mailto:fodhku.general@gmail.com)

Signed: .....

Date: .....