



Odonatology Section
Polish Entomological Society
Information update

Name and surname*:

Degree / scientific title: Professional affiliation:

.....
Are you a member of the Polish Entomological Society? YES/NO (delete as appropriate)

Contact address – postal*:

e-mail*:

telephone:

Professional address – postal:

e-mail:

telephone:

I give my consent to the publication and utilisation within the Odonatology Section of the following personal information:*

<input type="checkbox"/> name and surname	<input type="checkbox"/> place of residence
<input type="checkbox"/> full home address	<input type="checkbox"/> private e-mail address
<input type="checkbox"/> full professional address	<input type="checkbox"/> professional e-mail address
<input type="checkbox"/> personal image	<input type="checkbox"/> none of the foregoing

I consent to my personal data being stored in the address database of the Odonatology Section of the Polish Entomological Society, to their being published on the members' list on the Section's website and to their being utilised in connection with the Section's events, in the form indicated above.

.....
*place and date **

*signature**

* compulsory

Please note that all personal information entrusted to us will be treated in compliance with the EU's General Data Protection Regulation (GDPR), which came into force on 25 May 2018.