DATA SUBJECT INFORMATION

Full Name:	
Date of Birth:	
ID nr / Passport Nr:	
Contact Nr:	
Email:	
Relationship to the Company:	

I confirm my consent to process my Personal Data and Information by the Company, named hereabove, for the purpose of (*Mark with X*):

	Supply of Goods
	Rendering of Services
	Purchase of Goods
	Contracting for Services obtained
	Other: Specify

Consent is hereby granted from myself, the Data Subject, to the Company.

Signed at _____ on this _____day of _____ 20_____

Full Name:	
Signature:	

Kindly send this Data Subject Consent Form to the Information Officer of the Company

Information Officer: Mr WEJ Martin - **Phone:** +2787 351 6984 - **Email:** compliance@weram.co.za