

Lesekartennummer 2019000 _____

Referent/in _____



wienbibliothek
im rathaus

DECLARATION OF CONSENT

Dear visitors!

To receive a library card please complete this form. Name and date of birth must be documented with a valid ID. These data are processed electronically and are not shared with any third party.

Surname	_____	First Name	_____
E-Mail	_____	Date of Birth	____.____.____
Address	_____	City, ZIP code	_____
Profession	_____	Municipal dep.*	_____

*if applicable

I agree with the transmission and processing of the personal data concerned, as far as this is necessary for the use of the library. The information sheet „Information about data protection law according to art. 13 DSGVO - Use of the Wienbibliothek“ has been brought to my attention.

By signing I acknowledge Wienbibliothek's library regulations.

Vienna, _____
(date)

(signature)

Please sign the declaration of consent which is necessary according to Austrian telecommunications law. By signing I agree to Wienbibliothek sending me current information via email. If you are interested in receiving current information about the library (events, remarkable acquisitions, changes in opening hours...):

by e-mail

postal

The information sheet „Information about data protection law according to art. 13 DSGVO - Delivery of invitations to events of the Wienbibliothek“ has been brought to my attention.

(signature)