



ATLANTIC BEACH

ANNEXURE F1

BIOMETRICS CONSENT FORM IN TERMS OF S26 OF THE PROTECTION OF PERSONAL INFORMATION ACT NO. 4 OF 2013 (POPIA)

I, the undersigned _____(full name), Unit Number _____by my signature below give consent to the Homeowners' Association to process my biometric information.

Signature

_____/_____/_____

Date

GUARDIAN'S CONSENT

If the data subject above is under the age of 18, a competent person must give consent in terms of S35 of the POPIA.

I, the undersigned _____(full name), Unit Number _____by my signature below give consent to process the biometric information of _____.

Signature

_____/_____/_____

Date