

STATEMENT/AUTHORIZATION OF THE PATIENT (STATUTORY REPRESENTATIVE)**Patient's data:**

Name and surname:

Pesel/date of birth:

Address for correspondence:

Telephone number:

e-mail:

Data of statutory representative¹

Name and surname:

Pesel/date of birth:

Address for correspondence:

Document confirming the statutory representation²:

Telephone number:

I hereby declare that:

1. I was informed about the possibility of consenting to the provision of health services or refusal of such consent,
2. I have been informed about the possibility of being authorized to obtain information about the state of my/patient's health and health benefits,
3. I have been informed of the possibility to be authorized to obtain mine/patient's medical documentation or refuse to grant such authorization,
4. *I am a statutory representative of the patient³*

 I agree do not agree to the provision of health services by Med.-Polonia sp. z o.o. Prychodnia.**I AUTHORIZE⁴/DO NOT AUTHORIZE**

Name and surname of the authorized person:

Contact data of the authorized person (address, telephone number):
.....
.....
..... to obtain information about the state of my health and health benefits. to obtain medical documentation._____
Date and legible signature¹ If the patient is a minor or incapacitated person² If the child/incapacitated person has a different surname than the statutory representative, e.g. birth certificate, the court decision³ If applicable⁴ In the absence of authorization, cross out

STATEMENT/AUTHORIZATION OF THE PATIENT (STATUTORY REPRESENTATIVE)**Patient's data:****Name and surname:****Pesel/date of birth:** I agree I do not agree

- for placing my personal data, including my e-mail address in the database of MedPolonia Sp. z o.o., with registered office in Poznań at Obornicka 262, which will be their administrator, for their processing in accordance with the Regulation of the European Parliament and of the Council (EU) 2016/679 dated 27 April 2016 on the protection of individuals with regard to the processing of personal data and on the free flow of such data and the repeal of Directive 95/46/EC (general regulation on data protection) for marketing and information purposes: sending information on the Company's operations, information on new products and facilities of the Company, sending a newsletter. I hereby declare that I have been informed of the right to inspect my data and the possibility of requesting supplementation, updating, correction and temporary or permanent suspension of their processing.

 I agree I do not agree

- for sending commercial information by electronic means by MedPolonia Sp. z o.o., with its registered office in Poznań at ul. Obornicka 262, in accordance with the Act of July 18, 2002 on the provision of electronic services (Journal of Laws of 2002, No. 144, item 1204 as amended).

 I agree I do not agree

- for sending commercial information via SMS by MedPolonia Sp. z o.o., with its registered office in Poznań at ul. Obornicka 262, in accordance with the Act of July 18, 2002 on the provision of electronic services (Journal of Laws of 2002, No. 144, item 1204 as amended).

.....
Date and signature of the declarant**According to art. 13 of the Regulation of the European Parliament and of the Council (EU) 2016/679 of 27th of April 2016 on the protection of individuals with regard to the processing of personal data and on the free movement of such data and repealing Directive 95/46/EC (general regulation on data protection):**

- 1) The data administrator is Med-Polonia Sp. z o.o. with registered office at ul. Obornicka 262 in Poznań.
- 2) Contact with the Data Protection Inspector - odo@medpolonia.com.pl
- 3) Personal data will be processed for the purpose of providing medical services - pursuant to Article 6 par. 1 let. c and Article 9 par. 2 let. h of the general regulation on the protection of personal data of 27th of April 2016.
- 4) Personal data will be processed for marketing and information purposes - pursuant to Art. 6 par. 1 let. a of the general regulation on the protection of personal data of 27th of April 2016.
- 5) Recipients of personal data will only be entities authorized to obtain personal data on the basis of legal provisions and persons authorized on the basis of a submitted statement.
- 6) Personal data will be stored for the period specified in the Act of 6 November 2008 on patients' rights and the Patient's Rights Ombudsman.
- 7) You have the right to request from the Administrator access to personal data, the right to rectify the deletion or limitation of processing, the right to withdraw consent and the right to transfer data.
- 8) You have the right to lodge a complaint with the supervisory authority.
- 9) Providing personal data is obligatory under the law, and in the remaining scope voluntary.