

Request data removal

Fill out the form to request removal of personal data, stored by Wizkids A/S, in accordance with the General Data Protection Regulation (GDPR).

HOW DO I SUBMIT MY REQUEST?

In order to request data removal from our databases, you need to submit your personal information – including a copy of an identification certificate to ensure authenticity. If you submit this request on behalf of another, you must provide ID information on this individual.

Fill out the entire form and send us your request by mail. Wizkids A/S will then verify your information and remove your personal data within three months (90 days) from receiving your request – including the information contained in this document.

Wizkids A/S Vallensbæk Torvevej 9 2620 Albertslund Denmark ATT: “Right to be forgotten”

1. YOUR FULL LEGAL NAME (USE BLOCK LETTERS)

Please submit your own legal name - even if you make the request on behalf of others that you are authorized to represent. If you represent another person, you must be legally authorized to act on his or her behalf.

First name	
Last name	
Company	
Email address	
Phone	

2. I SUBMIT THIS FORM ON BEHALF OF (ADD CHECKMARK)

If you submit this request on behalf of someone else, you must indicate your connection to the person (eg. "parent", "attorney"). We may require displaying documentation that you are authorized to represent that person.

Myself	
A customer	
Family member	
Friend	
Other	

Describe your legal relationship with the individual in this request. If you are submitting a request on your behalf, then add "None" in the box below.

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3. ATTACH COPY OF DOCUMENT CONFIRMING THE IDENTITY OF THE INDIVIDUAL IN THIS REQUEST

In order to prevent fraudulent removal requests from people who pretend to be someone else trying to harm competitors or trying to withhold legal information, we need to verify your identity. A passport or other form of official identification is required. You are welcome to hide parts of the document (such as ID numbers) as long as the remaining information is enough to

identify you.

Wizkids A/S uses this information only to assist in documenting the authenticity of your request and when the removal request is closed, we will delete this copy within one month, unless otherwise required by applicable law.

4. DECLARATION

Read the following statements and tick the checkboxes to confirm that you agree.

I agree that the personal information I submit may be processed as described below:

Wizkids A/S uses the personal information you provide in this form (including your email address and any identifier information) and any personal information you may submit in subsequent correspondence in order to process your request and comply with our legal obligations.

I declare that the information in this request is correct and that I am authorized to submit this request.

I understand that Wizkids A/S cannot process my request if the form is not filled out correctly or if the request is incomplete.

5. SIGNATURE

Signature date	
Signature	