Individual Agreement Form LSC 2019 January 2019

I am	_, an individua	l associated	with the
_	_		

organisation

I intend to to receive/use the data designated as the LSC2019 Collection subject to the terms and conditions agreed to by my organisation. I confirm that I have read, understood and agree to the understandings, terms and conditions of using the LSC2019 Collection. I confirm that I will take care with the data so as to fulfill the terms and conditions of using the LSC2019 Collection.

By the Individual:		
ignature:		
Date:		
Name (Printed):		
mail Address:		
Organisation Contact (Printed):		
Organisation Contact (Signature):		

Please print, complete the above, and give it to your organisation contact who will maintain these individual agreement forms, should they be requested at a later date.