## LSC2020 Individual Agreement Form

January 2020

I am	, an individual associated with the

organisation \_\_\_\_\_

I intend to to receive/use the data designated as the LSC2020 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 LSC2020 Collection. I confirm that I will take care with the data so as to fulfill the terms and conditions of using the LSC2020 Collection.

By the Individual:
Signature:
Date:
Name (Printed):
Email 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.