

Form about Exercise of Rights for Personal Data Subjects

The security and privacy of Personal Data that concern you is a high priority for the firm **GA HOLIDAYS IKE** (hereinafter "Firm") established in IROON POLYTECHNEIOU 5, 31100, LEFKADA. We know that the confidentiality of your Personal Data is particularly important to you and we try to be as transparent as possible in the way we serve you. That is why we feel it is our duty to inform you of the rights you have regarding the collection and processing of your personal data and to facilitate you in exercising them. The request for exercising the rights is free of charge unless the request is manifestly unfounded or excessive.

1. Procedure

As your data controller, the Firm, in accordance with the legal framework:

- Is required, before responding to a request, to carry out your identification.
- Commits itself to assess your request and to proceed to its fulfillment, provided it is possible, within thirty days of the date of identification of the request.

In any case, you will be immediately informed of any development in the course of your request.

2. Personal data of the natural person exercising the right

Please carefully fill in all of the following fields to ensure optimal handling of your request:

Name	
Surname	
Address	
Contact phone number	
Mobile phone	
E-mail	

3. A right you wish to exercise

Type of right you want to practice (Please select only one of the following):

- Access to my personal data**
- Deletion of my personal data**
- Limitation of processing my personal data**
- Portability of my personal data**
- Correction of inaccuracies / completion of incomplete personal data**
- Objection to processing my personal data**

Please write down your request in detail in the field below.

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4. Select the means of communication with which you wish us to communicate with you about the development of your request:

- E-mail
- Correspondence
- Phone contact

5. Ways of sending the application

You can send your application in a letter with the note For Controller. To our address

GA HOLIDAYS IKE, IROON POLYTECHNEIOU 5, LEFKADA, 31100, Tel. 2645024550

or e-mail: info@gaholidays.gr

6. Confirmation and signature of data subject

I confirm that the information provided in this form is true and I am the person whose name appears herein. **I understand that:**

- The Firm must confirm my identity proof and may need to contact me for more information.
- My request will not be valid until the Firm receives all the information required to process the request, and
- As long as I exercise the right of access, I am entitled to a free copy of the personal data I have requested and I acknowledge that for any additional copies I request, the Firm may impose a reasonable charge considering the management costs.

Date

Name

Signature