## **Privacy Act Consent and Waiver**



I		[first and last name]	
Of		-	
·		[full current address]	
Date of birth			
Sign this privacy waiver and give consent to;			
Ed Lend Limited			
AND			
	[first and last	t name of person receiving con	sent]
	[relationship	of this person to you]	
	[email of per	rson receiving consent]	
To supply personal information about me and my sit explicitly consent to Ed Lend Ltd communicating to t disclosure of any information held by Ed Lend Ltd ab	he above-nar		I
This consent and waiver will remain in effect until		[enter a date]	
Signed	Dat	re	
ALL FIELDS ARE COMPULSORY.			

INCOMPLETE PRIVACY CONSENT AND WAIVER FORMS WILL NOT BE ACCEPTED.