



PERSONAL INFORMATION REQUEST

You can use this web form to exercise any of the following rights regarding your personal information:

- Confirm whether we have collected and retained personal information about you.
- Access your personal information.
- Correct inaccuracies in your personal information and/or update it, taking into account the nature of your information and the purposes for which we retain it.
- Delete some or all of your personal information. (Your right to delete your personal information is subject to certain exceptions and conditions.)

Also, if your personal information is available in a digital format, you have the right to obtain a copy of the information you previously provided to us in a portable, and to the extent technically feasible, readily usable format that will allow you to transmit the data to another entity without hindrance.

Please note that if your request is clearly unfounded, repetitive, or excessive, we may be permitted to charge you a reasonable fee to cover our administrative costs in responding to it or we may decline to act on your request. We also may have the right to charge you a fee, depending on the state in which you reside, if you make more than two requests annually. If we determine that a fee is warranted, we will notify you of the fee and explain the basis of our decision to charge it before responding to your request.

First, we need the following information about you to verify who you are. If we have a question about your identity based on the information you submit, we have the right to contact you before processing your request. Additionally, if you have asked to access information, delete it, or obtain a copy of it, we will send you an email or letter to verify your identity. (All fields marked with an asterisk must be completed in order to submit this form. This information will allow us to more quickly verify your identity and contact you if we have a question about your identity.)

First Name: * _____ Last Name: * _____

Email Address: * _____

Street Address: _____

Mailing Address (if different): _____

Your State: * _____ Zip Code: * _____

Phone Number (including area code): (____) _____

Next, please tell us what action(s) you would like us to take. (You may select more than one action.)

- Confirm whether personal information about me has been collected and retained.
- Give me access to my personal information.
- Correct inaccuracies in my personal information and/or update it. If you check this item, please tell us in the Comments field below what information needs to be corrected or updated, and provide us with the corrected/updated information. In addition, if you are correcting or updating your email address, street address, mailing address, and/or phone number, please provide your incorrect or prior email address, street/ mailing address, and/or phone number in the above field(s).
- Delete some or all of my personal information. If you want us to delete only some of your personal information, please tell us in the Comments field below what information should be deleted. *If you do not do so but have checked this item, we will delete **all** of your personal information. Please note the following about a deletion request. First, whether you request some or all of your personal information be deleted, a deletion request is subject to certain exceptions and conditions including information we're required or permitted to keep temporarily or permanently in compliance with applicable law. Second, if we delete all of your personal information, your past transactions with us -- including donations, the receipt of materials from us, your attendance at our events and participation in our courses, and other information about you -- will be irreversibly deleted in our records. You will also be unsubscribed from all of our communications, and any recurring donations will be canceled.* You may later resubscribe to our communications and re-engage in other ways with us, but doing so will not restore your past history with us. If we cannot delete any personal information that you have asked to be deleted, we will notify you when we have completed your other request(s).
- Provide me with a copy of my personal information in a portable, and if technically feasible, readily usable format.

Comments

In submitting this request, I confirm the following by checking each of these boxes (all boxes must be checked):

Under penalty of perjury, I declare that the above information is true and accurate;

I am the person whose name appears above;

I understand that the deletion of some or all of my personal information, if I have made this request, is irreversible; and

I agree that I can be contacted to verify my identity and if we have questions about what action(s) you would like us to take.

Please mail this form to:

Family Policy Alliance
8675 Explorer Drive, Suite 112
Colorado Springs, CO 80920

If you wish to scan this form into digital file, you can do so and email it to mail@familypolicyalliance.com