

Day of Visit:
(Date, Time)

Data Collection in Accordance with the Current COVID-19 Restrictions

Welcome to the film museum! Due to the ongoing COVID-19 pandemic, we are required to follow various health and safety guidelines. In this context we also need to ask all visitors to provide their contact data for the purpose of tracing possible infection paths to the responsible authorities.

Each visitor is required to fill in this form personally and in legible writing and submit the completed form to our staff at the box office.

Visitors from the same household may provide their data in one form. If you need more space, please use the back of this form.

Visitors under the age of 18 need the signature of their legal guardian.

.....
First name Last name

.....
First name Last name

.....
First name Last name

.....
First name Last name

.....
Street

.....
City code City

.....
Phone number

I hereby certify, that I have no COVID-19 symptoms (such as fever, cough, shortness of breath, new loss of taste and smell) and that I am not violating any quarantine regulations.

.....
Signature

Data Protection Notice:
The transmission of your personal data will only take place in accordance with Art. 6 (1) lit. c, d, e of the DSGVO and Art. 9 (1) of DSGVO. The processing of your data is necessary to identify people infected with the coronavirus and to inform those who may have been in contact with them. This is in line with all applicable legal regulations and has the primary function of protecting both your health and that of other people. If necessary, we shall share the collected information with the applicable health authorities.

Your data will be deleted by us 4 weeks after it was submitted. You have the right to access your data stored by us. You retain the right of rectification, deletion, and restriction of processing in accordance with the regulations in Articles 16 to 18 DSGVO. You also retain the right to lodge a complaint with the supervisory authority.