



**Association Data Protection Act Registration Exemption**

It is necessary for each Association not requiring to register with the Offices of the Data Protection Registrar to inform the BAB that they are following the exemption route. Please complete this form in full and return to:

Shirley Timms (BAB Secretary)  
6 Halkingcroft, Langley, Slough, Berkshire, SL3 7AT

Please write clearly in CAPITALS.

**Association Name :**

**Statement of Intent :**

**This document indicates that the above named Association has met the criteria as laid down in the “Guidelines for all BAB Associations Referring to the Data Protection Act 1998”.**

**The above mentioned Association understands that exemption from registration does NOT mean exemption from the law.**

**The above named Association will ensure that all Association Officials and Representatives are aware of their legal obligations.**

**Signatures of Acceptance**

**Association Head:**

Full Name (Please Print) :

Signature :

Date :

**Association Data Protection Officer:**

Full Name (Please Print) :

Signature :

Date :