

DATA SUBJECT PARENTAL CONSENT WITHDRAWAL FORM

I,....., holder of an identification Card with No.....the entitle of parental rights of the minor.....(herein referred to as the "Customer") I hereby withdraw my consent for the processing of the customer's personal data from Bank of Africa Rwanda Plc and all its third-party processors. The Bank no longer has my consent which was previously granted to process the customer's personal data.

I am aware that the customers as an existing client of the Bank that the withdrawal of my consent may result in the withdrawal of the provision of some or even all of the services customer was benefiting from the Bank.

N.B: Withdrawal of the consent will result into closure of customer's account since the operational accounts requires the Bank to hold and process customer's personal data.

Signed by the data subject parent:

Account Number:.....

Account Names:.....

Parent/Guardian Signature:.....

Date:.....

Bank's Official Use Only

Received by:.....

Received on:.....

Signature & Stamp:.....