

Consent to run a whip-round on the behalf of a person under my care

I, the undersigned,, holder of identity document number....., declare that I grant my consent to run a whip-round (whip-round ID:) on the zrzutka.pl portal to, holder of identity document number for the benefit of a person under my care (first name, last name and a personal identity number of a person under my care:.....).

This consent does not mean that I grant a power of attorney to the Organizer of a whipround. I am aware that the Organizer, being the sole party to the legal relationship with Zrzutka.pl sp. z.o.o., remains the owner of the funds collected within a whip-round created on Organizer's behalf.

I also declare that I know and understand the terms and conditions of withdrawals of funds collected by the Organizer on zrzutka.pl and I agree that the funds collected on the whipround will be withdrawn to the bank account number used in the verification process (according to Terms of Service available on zrzutka.pl). I also declare that the terms and conditions of transferring the collected amount to my bank account/to a bank account of a person under my care (in case of using Organizer's bank account during the verification process instead of my bank account, therefore in case of withdrawal of collected funds to the Organizer's account) have been discussed and agreed with the person organizing a whipround for the benefit of a person under my care. I am also aware that I have no claims against Zrzutka.pl sp. z.o.o. to withdraw the funds to a bank account other than the bank account verified by the Organizer.

Yours sincerely,

.....
(signature of the person granting the consent)