

DATA SHEET

to authorise the release of recordings stored in the Theatre Archive for research purposes

Dear Sir/Madam at Csokonai National Theatre Debrecen,

I would like to ask for your authorization to release the following performances from the Theatre archive, created by the Theatre in the framework of the project "Romanian-Hungarian Cross-border cultural incubator for performing arts" (ROHU445), for the following research purpose(s):

Name of the applicant	
Date of birth	
Nationality	
Address	
E-mail	
Phone number	
Purpose(s) of research	
Performance title	
Duration of the Claim	

By signing below, I certify and declare that I have read and understood the Csokonai Theatre - The Theatre Archive's Policy and Privacy Policy on the Release of Recordings for Research Purposes and I undertake to act in accordance with the provisions thereof.

I agree that I will use the recording solely for the purpose of the research indicated in the data sheet, which shall not serve to earn or increase any income, either directly or indirectly, and that I will keep confidential any personal data that I become aware of during the use of the recording, that I will treat the information in a confidential manner, that I will not make copies of it in any format, and that I will not use it in any other way than as described in the policy. I will destroy any personal data that I obtain in the course of my research once the purpose for which it was collected ceases to exist and I no longer need it.

I agree to cite the original source in any publication that refers to the performance.

I agree that the recording(s) may only be used by me and may not be accessed by any other person. Any liability arising from failure to comply with this restriction shall be borne by me, including liability for disclosure of personal data made available to me.

I acknowledge that the recording(s) are protected by copyright according to the provisions of Act LXXVI of 1999 on Copyright, and any further use(s) other than the research described in this application requires the permission of Csokonai National Theatre Debrecen.

I also acknowledge that the recording(s) may not be reproduced in any form or by any means, nor may it be duplicated, transmitted, edited, copied, distributed in any form or by any means, electronic or otherwise, be displayed in public, and the communication(s) to the public (including by terrestrial and/or satellite broadcasting, by wire or by any other similar means or media, and by any other means of communication to the public other than those listed above, e.g. interactive use on the Internet) is excluded.

I acknowledge that failure to comply with the provisions of this declaration shall constitute a breach of the law and may result in criminal prosecution, and that I am liable to pay compensation for any damage caused by the breach, which may be enforced against me in civil proceedings.

As the applicant, by signing this declaration, I declare that I understand the above, that I am of legal age, that I am a citizen of, that by signing the declaration I agree with all the provisions.

Date:(day) (month)(year)

applicant's signature

AUTHORISE / DENY

Name, title, signature of approver

Please fill in and sign the form and send it electronically (scanned) to ferenczy.csaba@csokonaiszinhaz.hu and send the original copy (by post or in person) to the Csokonai National Theatre Debrecen! (address: Csokonai National Theatre Debrecen - 4024 Debrecen, Kossuth u. 10.)