

TOUR MEDICAL TURİZM SEYAHAT ACENTESİ TIC. A.Ş.
HEALTH TOURIST PATIENT/ CLIENT
EXPLICIT CONSENT FOR CONTACT

I read and understood the "Clarification Text on the Processing of Personal Data" submitted to me by TOUR MEDICAL TURİZM SEYAHAT ACENTESİ TIC. A.Ş. ("TOUR MEDICAL") and "all my rights" regarding the legislation clearly stated in the text, verbally and in writing, in a language that I can understand, and by TOUR MEDICAL officials and employees I was informed by answering my questions. In line with the matters explained in the clarification text and the provisions in the KVKK and GDPR, I will provide the organization of my contact information from my Personal Data that I have given to TOUR MEDICAL, in order to obtain the health service I want to receive in Turkey, including transfer, accommodation, translation, treatment, and fulfil the health service to be applied to me, and for the purpose of making the planning for the health institution and / or doctor, to be informed personally about the service innovations, campaigns and promotions of TOUR MEDICAL. I consent that they are **PROCESSED** by TOUR MEDICAL for the purposes stated above, That they contact me for the fulfilment of the services offered by TOUR MEDICAL, to be informed about the innovations, campaigns and promotions regarding the services offered, and to **SEND ME AN SMS, E-MAIL, WHATSAPP MESSAGE, AND ESTABLISH MOBILE COMMUNICATIONS via my contact data for celebration and congratulation on special days or I AGREE TO BE REACHED TO ME THROUGH SERVICE PROVIDERS.**