

**APPLICATION FOR THE EXERCISE OF ARCO RIGHTS*,
AND/OR REVOCATION OF CONSENT.**



In accordance with the provisions of articles 8, 28 and 29 of the Federal Law for the Protection of Personal Data in Possession of Individuals (“*Ley Federal de Protección de Datos Personales en Posesión de los Particulares (“LFPDPPP”)*”), we provide you with this form to respond to your request for the exercise of ARCO rights (*Access, Rectification, Cancellation or Opposition) and / or Revocation of Consent.

1. ARCO RIGHT TO EXERCISE.				
<input type="checkbox"/> Access	<input type="checkbox"/> Rectification	<input type="checkbox"/> Cancellation	<input type="checkbox"/> Opposition	<input type="checkbox"/> Revocation
2. ARCO RIGHT TO EXERCISE.				
Holder:				
Surname.			Name(s).	
Holder's Legal Representative (if applicable):				
Surname.			Name(s).	
3. DOCUMENT ATTACHED TO PROVE IDENTITY OF THE HOLDER OR ITS LEGAL REPRESENTATIVE.				
Proof of the Holder's identity:		Proof of identity of the Legal Representative:		
<input type="checkbox"/> Copy of voter's credential. <input type="checkbox"/> Copy of Passport. <input type="checkbox"/> Copy of professional license. <input type="checkbox"/> Copy of National Military Service card (male). <input type="checkbox"/> Copy of valid passport or Immigration Document (foreigners).		<input type="checkbox"/> Copy of voter's credential. <input type="checkbox"/> Copy of Passport. <input type="checkbox"/> Copy of professional license. <input type="checkbox"/> Copy of National Military Service card (male). <input type="checkbox"/> Copy of valid passport or Immigration Document (foreigners). Proof of the Legal Representative: <input type="checkbox"/> Power of attorney signed in front of two witnesses and a copy of the witnesses' identification. <input type="checkbox"/> Notarized document stating the powers granted.		
In case of application of ARCO rights corresponding to minors:		In the event of application for ARCO rights corresponding to persons in interdiction status:		
<input type="checkbox"/> Copy of the minor's birth certificate. Guardian Accreditation: <input type="checkbox"/> Copy of the document proving that the person signing the application is the minor's guardian.		<input type="checkbox"/> Copy of the birth certificate of the person in interdiction status, (minors). <input type="checkbox"/> Copy of official identification of the person in interdiction status, (of legal age). Guardian Accreditation: <input type="checkbox"/> Copy of the document proving that the person signing the application is the guardian of the person in interdiction.		
4. MEANS THROUGH WHICH YOU WOULD LIKE TO RECEIVE THE RESPONSE TO YOUR APPLICATION.				
<input type="checkbox"/> By e-mail:				
_____ Specify e-mail address				
<input type="checkbox"/> By Conventional Address:				
Street.		Number.		Providence.
City.	State.	Country.	Zip Code.	

5. HOLDER'S RELATIONSHIP WITH "BON", BEAUTY NATURE LUXURY THEME PARK.

To facilitate the location of the information, please specify the type of relationship with BON:

- Client (term): _____
- Other (specify): _____

6. IN REFERENCE TO THE EXERCISE OF THE RIGHT OF RECTIFICATION, CANCELLATION OR OPPOSITION, DESCRIBE CLEARLY AND ACCURATELY THE PERSONAL DATA REGARDING WHICH RIGHT YOU'RE REQUESTING TO EXERCISE YOUR ARCO RIGHT(S).

7. ADDITIONAL INFORMATION RELATED TO THE ARCO RIGHT YOU WISH TO EXERCISE.

ACCESS: Right of the Holder to request access to his/her Personal Data, as well as information regarding the conditions and generalities of its processing.

RECTIFICATION: Right of the Holder to request the rectification or correction of his/her Personal Data, when these are inaccurate or incomplete.

Indique el(los) dato(s) que desea rectifica Indicate the data you wish to rectify:

Indicate the modification(s) requested and attach the document(s) that support your request:

CANCELLATION: Right of the Holder to request the deletion or elimination of his/her Personal Data, when Holder considers that such data is not being processed in accordance with the principles, duties and obligations set forth in the LFPDPPP.

Indicate the data(s) you wish to be cancelled:

Indicate the reason(s) why you consider that your data is not being processed in accordance with the principles and duties set forth in the LFPDPPP:

OPPOSITION: Right of the Holder to request the cessation of the processing of his/her Personal Data when there is a legitimate cause, and his/her specific situation so requires or when he/she requires the cessation of processing for specific purposes.

Indicate the Personal Data(s) you no longer wish to be processed by BON:

Mention the reasons why you oppose the processing of such Personal Data:

REVOCAATION: Right of the Holder to request the revocation of the processing of his/her Personal Data.

Describe the purpose(s) and reason(s) for which you wish to revoke your consent:

Under oath, I declare that the information.
provided in this form is true.

Name and signature of the Holder or
legal representative.

GENERAL INFORMATION.

Any request for ARCO rights must be requested through this application, in accordance with the following guidelines. If you do not comply with this requirement, BON will consider that your application has not been submitted.

- Fill in the form with legible print.
- Send the form by e-mail to the following account: datospersonales@bonpark.com.
- For a request to proceed, it must be accompanied by a copy of the document that proves the identity of the Holder and, if applicable, one copy of the document that proof the identity of its legal representative, as indicated in point 3 of this form.
- In the event of submitting this request through a legal representative, such representation must be accredited by means of a notarized document that contains the power of representation granted to the legal representative, or by means of a power of attorney signed before two witnesses, in which case said letter must be accompanied by a copy of the official identification of witnesses.
- In case of submitting a request for ARCO rights of minors or persons in interdiction status, it is essential to present the documents indicated in point 3.
- Clearly indicate in item 4 of this form, how BON will notify you of the response to your request.
- If your request is in accordance with the guidelines established in the legislation and our Privacy Notice, through BON's Personal Data department we will communicate the response to your request within 20 (twenty) business days from the date of receipt of your request.
- If your request is not accepted, we will inform you, within a term of no longer than 5 (five) business days after the date of receipt of the request, the cause of rejection or the request for new elements or documents to process your request.
- Please note that we are not obliged to cancel your Personal Data when its necessary for the development or fulfillment of the contractual relationship between you and BON, or when any legal obligation requires the continue keeping and / or processing of such Personal Data.
- The exercise of your ARCO Rights and/or Revocation of Consent is free of charge, and the Holder must only cover the justified shipping costs or the cost of reproduction of copies or other formats.
- Any dispute arising from this application or from your request for ARCO rights and/or Revocation of Consent, will be resolved in accordance with the provisions of the dispute resolution procedure set forth in our Comprehensive Privacy Notice.
- This application is governed by the Mexican laws applicable to the Protection of Personal Data in Possession of individuals, so any controversy will be resolved before the competent Mexican authorities.
- The Personal Data provided in this application will be processed for the purpose of responding to your request in accordance with the provisions of Chapter IV of the LFPDPPP.

Scan the QR Code to
download our



Privacy Notice