

Application Annex 1 (to be filled in by the contact person)

Last name and first name of the prisoner _____

Details of the contact person (IN BLOCK LETTERS)

Last name: _____

First name: _____

Skype username: live:.cid: _____

Email address: _____

Telephone number: _____

Additional participants

Children (max. 3)

First name, Last name	Date of birth	Address

Old persons (max. 1)

First name, Last name	Date of birth	Address

Declaration of consent:

I have read and understood the listed terms and conditions for the Skype connection. I agree to the terms of use. I can revoke my declaration of consent in writing at any time.

Plate / Date / Signature