* 34. Personal data of the family member who is an EU, EEA or CH citizen					
Surname			First name(s)		
Date of birth	Nationality			Number of travel document or ID card	
35. Family relationship with spouse chi			endant		
36. Place and date		37. Signature (for minors, signature of parental authority/legal guardian)			
I am aware that the visa fee is not refunded if the visa is refused.					
Applicable in case a multiple-entry visa is applied for (cf. field no 24). I am aware of the need to have an adequate travel medical insurance for my first stay and any subsequent visits to the territory of Member States.					
I am aware of and consent to the following: the collection of the data required by this application form and the taking of my photograph and, if applicable, the taking of fingerprints, are mandatory for the examination of the visa application; and any personal data concerning me which appear on the visa application form, as well as my fingerprints and my photograph will be supplied to the relevant authorities of the Member States and processed by those authorities, for the purposes of a decision on my visa application. Such data as well as data concerning the decision taken on my application or a decision whether to annul, revoke or extend a visa issued will be entered into, and stored in the Visa Information System (VIS) ⁽¹⁾ for a maximum period of five years, during which it will be accessible to the visa authorities and the authorities competent for carrying out checks on visas at external borders and within the Member States, immigration and asylum authorities in the Member States for the purposes of verifying whether the conditions for the legal entry into, stay and residence on the territory of the Member States are fulfilled, or identifying persons who do not or who no longer					
fulfil these conditions, of examining an asylum application and of determining responsibility for such examination. Under certain conditions the data will be also available to designated authorities of the Member States and to Europol for the purpose of the prevention, detection and investigation of terrorist offences and of other serious criminal offences. The authority of the Member State responsible for processing the data is: [()].					
transmitted the data, and to re request, the authority examini corrected or deleted, including	equest that data relation ng my application will ng the related remedic	g to me which are inaccurate be linform me of the manner in whes according to the national law	corrected and that ich I may exercise of the State con	lating to me recorded in the VIS and of the Member State which t data relating to me processed unlawfully be deleted. At my express e my right to check the personal data concerning me and have them the national supervisory authority of that Member State - 75334 PARIS CEDEX 07) will hear claims concerning the	
I declare that to the best of my knowledge all particulars supplied by me are correct and complete. I am aware that any false statements will lead to my application be rejected or to the annulment of a visa already granted and may also render me liable to prosecution under the law of the member State which deals with the application.					
prerequisites for entry into the compensation if I fail to com-	ne European territory ply with the relevant p	of the Member States. The me	re fact that a visa lation (EC) No 50	have been informed that possession of a visa is only one of the has been granted to me does not mean that I will be entitled to $52/2006$ (Schengen Borders Code) and I am therefore refused entry. States.	
Place and date Signature (for minors, signature)		Signature (for minors, signatur	ure of parental authority/legal guardian)		

 $^{^{\}left(1\right) }$ In so far as the VIS is operational.