

## Authorized Agent Designation Form

**Authorized Agent Designation Form Instructions:** If you are a resident of California and would like to designate an authorized agent to **submit** a request on your behalf related to your personal information ("PI"), please complete this form in its entirety and have your authorized agent attach a copy of the signed Authorized Agent Designation Form along with the request(s).

Process for submitting requests can be found in our Privacy Notice.

Please note, if Michael Kors is unable to verify the identity of the individual whom this request pertains to, we may ask for additional information or documents for verification purposes.

Customer Information	
Full Name of Customer:	
Email Address of Customer used in connection with Michael Kors account or transactions with Michael Kors	
Authorized Agent Information	
Full Name of Authorized Agent:	
Email Address of Authorized Agent:	
Type of Authorized Agent:	<input type="checkbox"/> Entity/Business <input type="checkbox"/> Attorney <input type="checkbox"/> Individual
Authorized Agent's California Secretary of State Registration Number <i>(required if Entity/Business is selected above):</i>	
Authorization	
By signing below and submitting this Authorized Agent Designation form, I, _____, affirm the following: <ul style="list-style-type: none"> <li>The information provided in this form is true and accurate;</li> <li>I am a California resident;</li> <li>The Authorized Agent is a natural person or an entity registered with the Secretary of State to conduct business in California;</li> <li>I understand that I may be contacted directly in order to verify my identity and confirm designation of my Authorized Agent;</li> <li>I grant the Authorized Agent permission to submit the request(s) indicated hereunder to <i>Michael Kors</i> on my behalf:</li> </ul> <div style="margin-left: 20px; display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Request to Delete my PI  <input type="checkbox"/> Request to Correct my PI                             </div> <div> <input type="checkbox"/> Request to access my PI  <input type="checkbox"/> Request to Opt-Out of the Sale/Share of my PI for targeted advertising                             </div> </div> <ul style="list-style-type: none"> <li>I authorize Michael Kors to process such request(s);</li> <li>I understand that any responses or correspondence produced in connection with a request will <b>not</b> be sent to my Authorized Agent, but will instead be sent directly to me at the e-mail address provided above;</li> <li>I agree to defend, indemnify, and hold Michael Kors harmless for any and all claims that arise against Michael Kors in relation to its reliance on this Authorized Agent Designation form.</li> </ul>	
Signatures	
Signature of Customer:	
Today's date (mm/dd/yy)	

**The authority granted by this form will terminate 90 days after the date of signature.**