

ALDER HEY CHARITY LOTTERY

REQUEST TO SELF EXCLUDE FROM GAMBLING FORM

Please exclude me from your lottery and any other gambling product promoted by the charity with immediate effect

We will exclude you for a minimum period of 6 months from the date of this request

Name.....

Address.....

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Signature.....

Date.....

Any additional information you wish us to be aware

of.....

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Continue on separate page if required

Please return the form to:

Sarah Fletcher, Alder Hey Children's Charity, Eaton Road, West Derby, Liverpool, L12 2AP