



Society Lottery **Self Exclusion Form**

Please exclude me from your lottery with immediate effect and do not make any direct contact with myself during my exclusion period.

(We will exclude you for a period of 6 months from the date of the form unless you stipulate an alternative specified time period).

Name:

Address:

.....

Lottery Name:

Membership Number (if applicable):

Date:

Comments:

.....

.....

Please return the form to: -

Wigan & Leigh Hospice - Lottery Office

FREEPOST NAT 4619

Hindley

Wigan

WN2 3BR



Licensed with The Gambling Commission under the gambling act 2005

Promoter – Wigan & Leigh Hospice

Gamble responsibly – gambling should be fun. If gambling is causing you a problem, for confidential advice & support contact

Gamcare uk helpline – 0808 8020 133 – website – www.gamcare.org.uk