## **GAMBLING SELF EXCLUSION FORM**

Charity Name:	
Title:	Mr Mrs Ms Miss Other
Full Name:	
Address:	
Postcode:	
Please exclude me from all lottery and raffle activity with immediate effect. I understand that by submitting this form, the exclusion will remain in place until I telephone to tell you that I wish to begin gambling again. Please note that by law the self-exclusion must apply for a minimum period of 6 months.	
Signature:	Date: / /
Please post this form back to Customer Services at our address shown on this website.	

## **Counselling and Support Services**

Are you gambling more than you really want to? If you or a family member feel that you are experiencing problems with gambling, you can seek advice and support from trained counsellors at GambleAware by calling the National Gambling Helpline on **0808 8020 133** or visit their website **www.gambleaware.co.uk**.

Software is available to prevent an individual computer from accessing gambling internet sites – please see **www.gamblock.com** for further information.

