



*Self Exclusion Agreement*

**Tel: 01293 447373**  
[www.stch.org.uk/lottery](http://www.stch.org.uk/lottery)

To cancel your regular payment and exclude yourself from the St Catherine's Hospice Lottery please complete the form below and return it to the lottery office at the address above.

**Membership Details**

Membership number (if known) \_\_\_\_\_

\*Mr/Mrs/Miss/Dr/Mr & Mrs/Other: \_\_\_\_\_ (Delete as applicable)

First Name \_\_\_\_\_ Surname \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Tel. Number \_\_\_\_\_ Email Address \_\_\_\_\_

**I hereby request St Catherine's Hospice Lottery to exclude me from any further draws or raffles for a minimum period of six months from the date below.**

Comments: .....

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Signature \_\_\_\_\_ Date \_\_\_\_\_

Please note, for those members playing by standing order or direct debit, that in addition to completely this form it will be necessary for you to cancel your regular payments with your bank.

A senior member of the lottery team will contact you shortly after receiving this form to discuss your wishes.



Gamcare provide support, information and advice to anyone suffering through a gambling problem. Call the National Helpline on 0808 8020 133

