REQUEST FOR LOSS LIMIT

Date: ……

Name/First Name……Nat. …… DOB ……

Address: ……

Identity document:……...No……..…

I request a **loss limit of** €……. ☐ per week ☐ per month

at all WINWIN outlets[1] of Glücks- und Unterhaltungsspiel BetriebsgesmbH in Austria for the period of:

☐ 1 month ☐ 3 months ☐ 6 months

The request for loss limit will be effective no later than the next business day after submission. The applicant declares that the information provided is accurate and complete and undertakes to immediately notify Glücks- und Unterhaltungsspiel BetriebsgesmbH ("WINWIN"), Responsible Gaming, Rennweg 44, A-1038 Vienna of any changes in information – e.g. name, nationality – in writing or by email to help@winwin.at.

Glücks- und Unterhaltungsspiel BetriebsgesmbH collects the personal data specified on the form as processor for Österreichische Lotterien GmbH and processes it for implementation of the loss limit. Processing is carried out on the basis of legal obligations in the area of player protection (Art. 6 para. 1 lit c GDPR), on the basis of our legitimate interest (Art. 6 para. 1 lit f GDPR) to limit the number of losses of guests at their request and, if applicable, on the basis of contract fulfilment (Art. 6 para.1 lit b GDPR). This data are subject to gambling secrecy and will be treated confidentially. More information on data processing can be found at winwin.at/datenschutz.

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Date Signature of applicant

[1] For a list of outlets, see www.winwin.at