

LOSS LIMIT APPLICATION

Date/Time:

Name/First Name.....Nat. DOB		
Address:		
Identity document:.....No.....		
I request a loss limit of €..... <input type="checkbox"/> per week <input type="checkbox"/> per month		
at all WINWIN outlets¹ of Glücks- und Unterhaltungsspiel BetriebsgesmbH in Austria for the duration of		
<input type="checkbox"/> 1 month	<input type="checkbox"/> 3 months	<input type="checkbox"/> 6 months

The loss limit application shall become effective from the date on which it is made or the working day following receipt at the latest. The applicant states that the information provided is truthful and complete and undertakes to immediately notify Glücks- und Unterhaltungsspiel BetriebsgesmbH, 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 referred to on the form electronically in its capacity as controller and processes these data for implementation of this loss limit application. Processing is carried out on the basis of our legal obligations in the area of player protection (Article 6(1)(c) GDPR), on the basis of our legitimate interest under Article 6(1)(f) GDPR to limit the number of losses each month of a guest at her/his request and, if applicable, on the basis of contract performance (Article 6(1)(b) GDPR). These data are subject to game secrecy and will be treated confidentially. More information on data processing can be found at winwin.at/datenschutz.

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Date

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Signature of applicant

¹ For a list of outlets, see winwin.at