

Data Subject Access Request Form

Please complete this form if you would like Aspers UK Holding Limited ('Aspers') to comply with your request under your right as a 'data subject'. The Data Protection Act (DPA) 2018 and the EU General Data Protection Regulation (GDPR) 2018 provide you with a right of access to personal data that Aspers hold about you. We will respond within 30 days of the date of receipt of your request. This period may be suspended while we await receipt of any further information requested from you. This form will only be used for the purposes of identifying your personal data that you have requested. Where disclosure would adversely affect the rights and freedoms of other individuals, we may not be able to provide you with the information that you have requested, in which case, you will be informed of our decision.

Sections 1-5 must be completed by you as appropriate to your request.

If after you have received the information you have requested, you believe that the information is inaccurate or out of date / we should no longer be holding the information (please also read our Privacy Policy) / we are using your information for a purpose of which you were unaware / we have passed inaccurate information about you to someone else – then, please notify Aspers Data Protection Officer at dataprotection@aspers.co.uk, giving your reasons.

Section 1: Are you the Data Subject?

| 'Data Subject' is the individual whose personal data is being collected, held or otherwise processed. |
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| 1.1 Please tick the appropriate box: |
| Yes: I am the Data Subject |
| No: I am acting on behalf on the data Subject |
| 1.2 Consent given by Data Subject (to be completed by the Data Subject if answered 'No' to above question) |
| I, the Data Subject , hereby give my consent for the following named person to act on my behalf in relation to this request and authorise Aspers to disclose any personal data about me held by Aspers. |
| Full Name of third party |
| Your relationship with the Data Subject |
| Proof of ID as detailed below (of the third party): |
| |
| Proof of Address as detailed below (of the third party): |
| Signed (Data Subject) |

Section 2: Details of the Data Subject and Third Party

To ensure Aspers is releasing data to the correct person, the Data Subject and Third Party will be required to provide Aspers with proof of their identity & address. This information is required in all cases. If we are not satisfied you are, or who you claim to be, we reserve the right to refuse your request.

| lease supply Aspers with a copy (do not send the originals) of one each of the following: | | | |
|--|--|--|--|
| 2.1 Proof of Identity [ID] (one of the following items for both the Data Subject and the Third Party): | | | |
| Current / Valid Passport (photocopy must include clear personal details and a clear photo) | | | |
| Valid UK Photo Driving Licence | | | |
| Valid National Identity Card / Current Identity Card issued by Electoral Office for Northern Ireland | | | |
| Alternatively, Government issued documents without a photograph may be used (showing your full name, supported by a second document also Government issued, or issued by similar authority. The second document must also include your full name and residential address and date of birth). | | | |
| Firearms Certificate or Shotgun Licence | | | |
| .2 Proof of Address (one of the following items must show the Data Subject and Third Party's name and full address) | | | |
| Utility Bill (no more than 3 months old) | | | |
| Bank Statement (no more than 3 months old) / Credit Card Statement (no more than 3 months old) | | | |
| Current TV Licence /Local Authority Tax Bill /HMRC Tax Document (no more than 1 year old) | | | |
| 2.3 Please complete the following if you are the Data Subject | | | |
| Name: | | | |
| | | | |
| Date of Birth: | | | |
| Date of Birth: Address: | | | |
| | | | |
| Address: | | | |
| Address: Contact Telephone No: Email Address | | | |
| Address: Contact Telephone No: | | | |
| Address: Contact Telephone No: Email Address Customer No: (if applicable) | | | |
| Address: Contact Telephone No: Email Address Customer No: (if applicable) ection 3: Details of the person requesting information (if acting on behalf of the Data Subject as a 'Third Party') | | | |
| Address: Contact Telephone No: Email Address Customer No: (if applicable) ection 3: Details of the person requesting information (if acting on behalf of the Data Subject as a 'Third Party') 1 Please complete the following: | | | |
| Address: Contact Telephone No: Email Address Customer No: (if applicable) ection 3: Details of the person requesting information (if acting on behalf of the Data Subject as a 'Third Party') | | | |
| Address: Contact Telephone No: Email Address Customer No: (if applicable) ection 3: Details of the person requesting information (if acting on behalf of the Data Subject as a 'Third Party') 1 Please complete the following: | | | |
| Address: Contact Telephone No: Email Address Customer No: (if applicable) ection 3: Details of the person requesting information (if acting on behalf of the Data Subject as a 'Third Party') 1 Please complete the following: Full Name | | | |

Please describe (providing as much detail as you can) of the information requested, providing any relevant details you think will help us in sourcing the information you require, including:

| Section 4: Details of the information req | uested | | |
|---|---|--|--|
| 4.1 Please complete the following: | | | |
| The reason and (the urgency) for the in | formation requested: | | |
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| 4.2 Please complete the following details | : | | |
| Type of Data/information (ie Win / Loss History) | Date range (ie 2020 - 2021 / Lifetime) | Additional Comments | |
| 1 | | | |
| 2 | | | |
| 3 | | | |
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| Section 5: Declaration (to be completed b | y the Data Subject/ Third Part | у) | |
| I, the Data Subject confirm that I have rea | d and understood the terms | of this Data Subject Access Request Form | |
| and certify that the information given in | | | |
| that it is necessary for Aspers UK Holdir identity and it may be necessary to obt | - | - | |
| requested. | | · | |
| For further information please click here for our: Privacy Policy, Aspers World T&Cs and Casino Rules | | | |
| | | | |
| Name | | | |
| | | | |
| Signed | | Date | |
| Please return the completed form to: | | | |
| The Data Protection Officer, Aspers West | field Stratford City, 312 The | Loft, Montfichet Road, Stratford | |
| London E20 1ET | ,, | • | |

Email: dataprotection@aspers.co.uk