

# HAPPY HALLO WEEN

FIRST NAME:

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Please include the child's first name, along with a parent/guardian's name and contact number, on the back of this sheet.

By entering this competition, you consent to the submitted image being publicly displayed within the pharmacy. You also agree to provide your child's name and a contact telephone number, which will be used solely for the purpose of notifying winners.

Entries must be submitted by a parent or guardian, who confirms their consent to the processing of this information in accordance with GDPR guidelines.