

Complaint Submission Form

This Player Complaint Submission Form complies with the Player Complaints Policy, which aligns with Article 5.3 of the National Ordinance on Games of Chance (LOK) and Curaçao Gaming Authority (CGA) requirements. You can view the full Player Complaints Policy on our website at kraken.casino/en/dispute-resolution

Instructions:

Only registered account holders may submit a complaint. Third-party complaints will not be accepted.

Please complete all sections of this form and attach any supporting documents, if relevant. Once completed, email the form to support@kraken.casino. We'll confirm receipt and update you on the review process via your registered email, so please check your mailbox regularly.

1. Player Information

Full Name:	
Residential Address:	
Place of Residence (City/Country):	
Account Number/Username:	
Email Address:	
Phone Number:	

2. Complaint Details

Date of Incident:	
Date of Complaint Submission:	

2.1. Type of Complaint (please tick):

☐ Deposit/Withdrawal	☐ Data Protection
☐ Player Balances Treatment	☐ Technical/Software Issue
☐ Bonus Terms & Conditions	☐ AML
☐ Account Restriction/Closure	☐ Fraud
☐ Game Outcome/Fairness	☐ License or Regulatory Issue
☐ Responsible Gaming	☐ Unfair Terms & Conditions
☐ KYC/Verification	☐ Other (please specify):

2.2. Complaint Description

Please provide a detailed description of your complaint:

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3. Supporting Documentation

Are you attaching any supporting documents?

- ☐ Yes
☐ No

If yes, please list them:

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4. Submission Instructions

Email the completed Player Complaint Submission Form together with all supporting documentation at your possession, if any, to: support@kraken.casino

You will be informed of your complaint review process via your registered email only. Please regularly check your mailbox for any updates.

5. Declaration

I declare that the information provided is true and complete to the best of my knowledge.

I understand that false statements may result in the rejection of my complaint.

Signature: _____	Date: _____
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For Official Use Only

Date Received:

Complaint Reference Number:

Assigned To:

Resolution Date:

Outcome/Notes: