



Notice of Withdrawal

If you wish to revoke your registration on our website or in our app, please fill in the fields below and send this document to: info@cisali.com.

Upon receipt of the document, your data will be deleted immediately from our database.

Citizens Save Lives Association Limited

Unit 4/5

Newlands Business Park

Newland Road

Clondalkin Dublin 22 FY22

Ireland

Email Address: info@cisali.com

Web Address: www.cisali.com

I / We (*) hereby revoke my / our location registration of my / our defibrillator (*), my / our registration as a first responder, my / our created user account in the Cisali app.

Registered on (*) _____ / registered as (*) _____

Location of the defibrillator (address, floor / room)

Contact Details/ Account Details (Name, Phone, E-Mail)

Contact details of the first aider (name, e-mail, mobile number, proof)

Signature, Company stamp

Place and date

(*) Delete as Necessary