



EBO Cooperative App Account Deletion Request Form

Please complete the following form if you wish to request the deletion of your account and associated data from the EBO Cooperative App. Once your request is processed, your account and personal information will be permanently deleted from our systems. Please note that this action cannot be undone, and you will lose access to all features and services provided by the EBO Cooperative App.

Account Information:

- Full Name: _____
- Email Address: _____
- Phone Number (associated with the account): _____
- User ID (if known): _____

Reason for Account Deletion:

Please briefly explain why you are requesting the deletion of your account:

Acknowledgment:

By submitting this form, I acknowledge that:

1. I understand that the deletion of my account and associated data is irreversible.
2. I will lose access to all services and features provided by the EBO Cooperative App.
3. I am responsible for any consequences resulting from the deletion of my account, including loss of data and inability to recover account information.
4. EBO Cooperative may retain certain information as required by law or for legitimate business purposes, even after account deletion.

Signature:

Date:
