



“Established in terms of the Limpopo Casino and Gambling Act, Act No. 4 of 1996, and retained in terms of the Limpopo Gambling Act, Act No. 3 of 2013.”

## SELF EXCLUSION FORM

I, the undersigned:

.....  
(Full names)

1. Make this statement in English, freely and voluntarily and without undue influence.
2. I am NOT under the influence of any alcoholic beverages, controlled substances, drugs or prescription medication that would prevent me from making a rational and informed decision regarding whether or not to execute this application.
3. Hereby request and authorize the Limpopo Gambling Board, Licensed Gaming Operators and / other Provincial Gambling Boards to deny me access or bar me from participating in gambling at all Gambling entities in:

<b>LIMPOPO</b>	
<b>NATIONAL</b> (RSA ONLY)	

4. I hereby acknowledge and agree that:
  - a) This will exclude me immediately from all Designated Gambling Areas.
  - b) My name shall be added to the Limpopo Gambling Board's Provincial Register of excluded persons and / or the National Register of excluded persons
  - c) By completing this application at this establishment in the above manner, I voluntarily and concurrently enter into similar binding agreements (i.e. terms, conditions, indemnities, etc) with other Provincial Gambling Boards and Gambling Operators (i.e Casinos, Bingo Operators, Bookmakers, Totalizators, Route Operators and Limited Payout Machine Sites (LPMs) in the Limpopo Province and / or Nationally.
  - d) I authorize the Limpopo Gambling Board, other Provincial Gambling Boards, National Gambling Board and / or Gambling Operators to photograph me in digital format and also to circulate such photographs, the completed self-exclusion forms, copies of my Identity Documents and / or Driver's License to all relevant stakeholders for the sole purpose of complying with my request.

<b>I have read and understood the contents of the above Section</b>	<b>YES</b>	<b>NO</b>	
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5. My details are as follows:

<b>Full Names</b>			
<b>Surname</b>			
<b>Nicknames or Aliases</b>			
<b>Identity Number</b>			
<b>Date of Birth</b>			
<b>Nationality</b>			
<b>Gender</b>		<b>Male</b>	<b>Female</b>
<b>Home Language</b>			
<b>Distinguishing Marks</b>			
<b>Height :</b>		<b>Weight:</b>	
<b>Eye Colour</b>		<b>Hair Colour:</b>	

<b>Residential Address</b>	
	<b>Code</b>
<b>Postal Address</b>	
	<b>Code</b>
<b>Cell Number</b>	
<b>Home Telephone Number</b>	
<b>Fax number</b>	
<b>Email address</b>	

<b>Marital Status</b>	
<b>Employment status</b>	
<b>Annual Income</b>	
Below R50 000	
R50 000 – R100 000.00	
R100 000.00 – R200 000.00	
R200 000.00 – R300 000.00	
Above R300 000.00	
<b>Number of Dependents</b>	

6. Do you understand/acknowledge that :

6.1	By asking to be self-excluded you are accepting that that you are a problem gambler and that you are unable to gamble responsibly?	Yes	No
6.2	<b>This exclusion will NOT be lifted within a period of six (06) months from the date hereof?</b>	Yes	No
6.3	The Limpopo Gambling Board and all Licensed Gaming Operators recommend that you seek treatment for your gambling problem?  <b><i>The License Holder/Regulatory Authority encourages you to utilize (or continue to utilize) the free treatment services provided by the National Responsible Gambling Programme (NRGP) of the South African Responsible Gambling Foundation, for people who have a problem with gambling?</i></b>  <b><i>The NRGP promotes responsible gambling and offers the following services:</i></b>  <ul style="list-style-type: none"> <li>- <b><i>Treatment to those affected by problem gambling.</i></b></li> <li>- <b><i>Toll Free 24 Hours Helpline (0800 006 008)</i></b></li> <li>- <b><i>Free Consultations with a Counselor, and</i></b></li> <li>- <b><i>In-Patient treatment</i></b></li> </ul>	Yes	No
6.4	Notwithstanding the provisions contained in the legislation, according to the terms of this application, it is your responsibility to stay away or not to enter any Designated Gambling Areas the Province and / or Nationally?	Yes	No
6.5	By completing this application, a further consequence of you being discovered at any Designated Gambling Areas, is that you may be arrested for trespassing?	Yes	No
6.6	By completing this application, a further consequence of being discovered at any Designated Gambling Areas at other Casinos, is that you will <b>Not be eligible to Win</b> a gambling game and therefore will be <b>denied</b> winnings you may attempt to claim while visiting any Designated Gambling Areas in the Province and/ or Nationally?	Yes	No
6.7	By completing this application you are authorizing the Limpopo Gambling Board and its License Holders to release the contents of your application – Including your name and ID Number to all licensed casino operators; Bookmakers; Totalizators; Bingo Operators; Route Operator and Limited Payout Machine Sites (LPM) including other Provincial Regulatory Authorities for the purpose of complying with your request?	Yes	No

6.8	The release of the information in your application to all Licensed Gaming Operators and Provincial Regulatory Authorities will result	Yes	No
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	in you being denied service at any Designated Gambling in the Province / or Nationally and the consequence of you violating this agreement is that you:		
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- <b>May be arrested for trespassing</b>	Yes	No
- <b>Will forfeit any winnings in your possession at the time of detection</b>	Yes	No
- <b>Will not be entitled to a refund of any money wagered or to any losses incurred prior to the time of detection</b>	Yes	No
- <b>Will forfeit any benefits accrued to you on the operator's loyalty programs both prior to this application and before any approval to revoke the exclusion is granted?</b>	Yes	No

6.9	<b>You are an Excluded Person until such time that a written application to revoke the exclusion has been received and approved by the Regulatory Authority?</b>	Yes	No
6.10	The request to lift this Self-exclusion will only be considered provided you produce proof of counseling from a Psychologist, Psychiatrist or any counselor appointed by the National Responsible Gambling Programme (NRGP) stating that you have attended the necessary problem gambling counseling sessions, and that you are deemed competent to gamble responsibly?	Yes	No
6.11	Any winnings from a gambling activity during the period of exclusion will be forfeited.	Yes	No
6.12	It is clear that whilst the Board and the gaming operators will make reasonable efforts to give effect to your request for exclusion from gambling at any Gambling Areas, it is your responsibility to ensure that you refrain from participating in gambling during the period of exclusion.	Yes	No

DECLARATION / WAIVER / RELEASE:

<p><b>I have read and understood the contents of the above Sections and I hereby:</b></p> <p>Indemnify, and hold harmless the Limpopo Gambling Board and its employees, other Provincial Gambling Boards, the licensed gaming operators, directors, agents, and employees against all and, any proceedings, actions, claims, suits, debts, judgements, executions, costs and demands whatsoever, known or unknown, in law and equity, which I , the undersigned, and my heirs, successors, administrators, executors and assigns ever had, now has, may have, or claim to have against any or all of the said entities or individuals arising out of or by reason of the processing, enforcing or any other action or omission relating to this application including but not limited to, the release of the contents of my application to any Regulatory Authority, License Holder, its agents or employees.</p>	<b>Yes</b>	<b>No</b>
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.....  
**Signature**

Signed at the Limpopo Gambling Board Polokwane on the      **Day of**      **201**

**REPRESENTATIVE THAT ASSISTED WITH THIS APPLICATION:**

1.     **Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_
2.     **Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**NOTES / ADDITIONAL INSTRUCTIONS / REQUESTS:**

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**APPLICANT SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_