

DRAFT

California Gambling Control Commission
SPECIFIC LANGUAGE OF PROPOSED REGULATIONS

CGCC-GCA-2014-0#-R

CALIFORNIA CODE OF REGULATIONS

TITLE 4. BUSINESS REGULATIONS.

DIVISION 18. CALIFORNIA GAMBLING CONTROL COMMISSION.

CHAPTER 7. CONDITIONS OF OPERATION FOR GAMBLING ESTABLISHMENTS.

ARTICLE 6. PROGRAM FOR RESPONSIBLE GAMBLING.

§ 12460. Article Definitions.

For purposes of this Article:

(a) “Self-Exclusion” means ~~an irrevocable~~ voluntary agreement to be excluded from all gambling establishments and all controlled games or gaming activities or privileges and to be prohibited from collecting any winnings or recovering any losses for a specified term. A ~~Self-Exclusion~~ list of self-excluded persons shall be maintained by the Bureau and shall not be open to public inspection.

(b) “Self-Restriction” means ~~an irrevocable~~ voluntary agreement with a single gambling establishment that is irrevocable for a specified term to:

(1) ~~Be C~~completely restricted~~exclude~~ from ~~the a particular~~ gambling establishment and all controlled games or gaming activities or privileges and to be prohibited from collecting any winnings or recovering any losses~~;~~

(2) ~~Be restricted~~Exclude from the play of a particular game or gaming activity, if the gambling establishment determines that such segregation of games is feasible~~;~~

(3) Restrict the amount of credit ~~and/or~~ check cashing available~~that may occur at that particular gambling establishment;~~ ~~and/or,~~

(4) ~~Be restricted~~Exclude from all marketing or promotional activities conducted by or on the behalf of the particular gambling establishment.

Note: Authority cited: Sections 19811, 19840, 19841(o), and 19920, Business and Professions Code. Reference: Section 19845, Business and Professions Code.

DRAFT

additions shown in blue underline; deletions shown in ~~red-strikeout~~

Revision Date: 09/11/2014

Page 1 of 28

DRAFT

SPECIFIC LANGUAGE OF PROPOSED REGULATIONS PROGRAM FOR RESPONSIBLE GAMBLING

1 **§ 12461. Posting Referral Information.**

2 (a) Each licensee, ~~by July 1, 2007,~~ shall post or provide, at patron gambling entrances or
3 exits, and in conspicuous places in or near gambling areas and any areas where cash or credit are
4 available to patrons, accessible written materials concerning the nature and symptoms of
5 problem gambling and the toll-free telephone number approved by the Office of Problem and
6 Pathological Gambling (or its successors) that provides information and referral services for
7 problem gamblers, currently “1-800-GAMBLER.”

8 (b) Any website ~~If the licensee operated~~ s by or on behalf of any web site for the gambling
9 enterprise establishment, TPPPS or gambling business ~~by July 1, 2007, that web site~~ shall contain
10 a responsible gambling message and a link to the Office of Problem and Pathological Gambling
11 (or its successors) that provides information and referral services for problem gamblers, currently
12 “http://www.problemgambling.ca.gov.”

13 (c) Any advertising material ~~If the licensee produced~~ s by or on behalf of any advertising
14 material gambling enterprise, TPPPS or gambling business, ~~by July 1, 2007, such material~~ shall
15 contain a responsible gambling message and shall refer to the telephone number listed in
16 subsection (a) above and ~~/or the link to~~ the web site listed in subsection (b), above.

17 Note: Authority cited: Sections 19811, 19840, 19841(o) and 19920, Business and Professions Code. Reference:
18 Sections 19801 and 19920, Business and Professions Code; and Sections 4359.2 and 4369.4, Welfare and
19 Institutions Code.

20

21 **§ 12462. Training Requirements.**

22 (a) Each licensee shall have ~~establish and implement, by July 1, 2007,~~ procedures for
23 providing to conduct new employee orientations and annual training concerning problem
24 gambling for all employees, ~~excluding food and beverage servers,~~ who have direct interaction
25 ~~directly interact~~ with gambling patrons in gambling areas. A licensee may develop an internal
26 training program or may use a training program developed and provided by the Office of
27 Problem and Pathological Gambling. At a minimum, orientations and training shall include the
28 following employee groups:

29 (1) Any employee described in subsection (a), including but limited to, food and
30 beverage servers, with duties not related to the operation of a controlled game;

DRAFT

Additions shown in blue underline; deletions shown in ~~red strikeout~~

Revision Date: 09/11/2014

Page 2 of 28

DRAFT

SPECIFIC LANGUAGE OF PROPOSED REGULATIONS PROGRAM FOR RESPONSIBLE GAMBLING

1 (2) Any employee described in subsection (a) with duties that include a function related
2 to the operation of a controlled game; and,

3 (3) Any key employee described in subsection (a).

4 ~~(b)(1) New employee orientations and annual training shall be documented, including~~
5 ~~signatures by the employee and the licensee or key employee who coordinated the training, the~~
6 ~~date and length of the training, and the name of the trainer, as part of the licensee's application~~
7 ~~for renewal. Copies of this documentation shall be kept in an employee's personnel file for a~~
8 ~~minimum of five years.~~ shall be completed no later than 30 days after the issuance of a license or
9 work permit.

10 (2) Annual training must be provided to each employee during each calendar year
11 following any calendar year in which a new employee orientation was provided. Annual training
12 may be completed in segments provided that the entire requirement is met during the calendar
13 year.

14 (3) Each licensee shall designate personnel responsible for maintaining the program,
15 coordinating training, and documenting employee completion. Copies of employee completion
16 documentation shall be kept in the employee's personnel file for a minimum of five years and
17 shall include the date of the training, the topics covered and signatures of the employee receiving
18 the training and the employee responsible for coordinating training.

19 (c) The training programs for new employee orientation and annual training shall, at a
20 minimum, consist of:

21 (1) Current information concerning the nature and symptoms of problem gambling
22 behavior;

23 (2) How to assist~~ing~~ patrons in obtaining information about problem gambling programs;

24 ~~and~~
25 (3) Information on the self-restriction and self-exclusion programs;

26 (4) Current information about any help and prevention services offered by the State
27 Department of Public Health, Office of Problem and Pathological Gambling; and,

28 (5) Current information about Gamblers Anonymous, Gam-Anon, and any other relevant
29 programs or services available in and around the location of the gambling establishment.

DRAFT

Additions shown in blue underline; deletions shown in ~~red-strikeout~~

Revision Date: 09/11/2014

Page 3 of 28

DRAFT

SPECIFIC LANGUAGE OF PROPOSED REGULATIONS PROGRAM FOR RESPONSIBLE GAMBLING

1 (d) ~~Each licensee shall designate personnel responsible for maintaining the program and~~
2 ~~addressing the types and frequency of such training and procedures.~~ (1) New employee
3 orientations and annual training for the employee group identified in paragraph (1) of subsection
4 (a) shall include, at a minimum, the information specified in paragraph (1) of subsection (c).

5 (2) New employee orientations and annual training for the employee group identified in
6 paragraph (2) of subsection (a) shall include, at a minimum, the information specified in
7 paragraphs (1) and (2) of subsection (c).

8 (3) New employee orientations and annual training for the employee group identified in
9 paragraph (3) of subsection (a) shall include, at a minimum, all of the information specified in
10 subsection (c).

11 (e) This section shall not be construed to require employees to identify problem gamblers.

12 Note: Authority cited: Sections 19811, 19840, 19841(o) and 19920, Business and Professions Code. Reference:
13 Sections 19801 and 19920, Business and Professions Code; and Sections 4369.2 and 4369.4, Welfare and
14 Institutions Code.

16 **§ 12463. Self-Restriction Program.**

17 (a) Licensees shall ~~establish and~~ implement, ~~by July 1, 2007,~~ a program that allows
18 patrons to self-limit their access to the gambling establishment entirely, or to the issuance of
19 credit, check cashing, or marketing by that licensee. That program shall contain, at a minimum,
20 the following:

21 (1) The development of written materials for dissemination to patrons explaining the
22 program;

23 (2) The development of written forms allowing patrons to participate in the program,
24 which may include use of a form entitled Self-Restriction Request, Form, CGCC-036 (Rev.
25 ~~07XX/134~~), attached in Appendix A to this chapter;

26 (3) Policies and procedures for maintaining and updating a list of self-restricted persons,
27 wherein the confidentiality of the list is protected pursuant to Section 12466 and only agents or
28 employees have access, unless needed by Bureau staff or law enforcement pursuant to an
29 investigation or in assisting in a Problem Gambling program by an entity approved by the
30 Commission;

DRAFT

Additions shown in blue underline; deletions shown in ~~red-strikeout~~

Revision Date: 09/11/2014

Page 4 of 28

DRAFT

SPECIFIC LANGUAGE OF PROPOSED REGULATIONS PROGRAM FOR RESPONSIBLE GAMBLING

1 (4) Policies and procedures that allow a patron to be ~~restricted~~excluded from certain
2 games or gaming activities within the gambling establishment, if the licensee determines that the
3 segregation of games is feasible, or from the gambling establishment completely during the term
4 of ~~restriction~~exclusion, with the exception of access for the sole purpose of carrying out the
5 duties of employment, including:

6 (A) Removal procedures for patrons who attempt entry after requesting to be
7 ~~restricted~~excluded,

8 (B) Maintenance of records~~Notification to the Bureau~~ of any incidents of removals ~~where~~
9 ~~the police and/or security are called to remove a person from the premises~~, accessible by Bureau
10 staff or law enforcement pursuant to an investigation or in assisting in a Problem Gambling
11 program by an entity approved by the Commission, and

12 (C) Forfeiture of any money or prizes won or any losses recovered by a ~~n~~
13 ~~restricted~~excluded person and the remittance of such for deposit into the Gambling Addiction
14 Program Fund for problem gambling prevention and treatment services through the State
15 Department of Public Health, Office of Problem and Pathological Gambling;

16 (5) Policies and procedures that allow a patron to be ~~restricted~~excluded from access to
17 check cashing or the issuance of credit during the term of restriction;

18 (6) Policies and procedures that allow a patron to be ~~restricted~~excluded from customer
19 lists maintained by the licensee for direct mail marketing, telephone marketing, and other direct
20 marketing regarding gaming opportunities or promotions at the gambling establishment during
21 the term of restriction;

22 (7) Policies and procedures for removal of a patron from check-cashing, credit, or
23 marketing opportunities by the licensee.

24 (b) This section does not mandate that a licensee provide the services of a notary public
25 for persons who wish to complete the Self-Restriction Request form.

26 Note: Authority cited: Sections 19811, 19840, 19841(o) and 19920, Business and Professions Code. Reference:
27 Sections 19801, 19920 and 19954, Business and Professions Code; and Section 4369.4, Welfare and Institutions
28 Code.

29

DRAFT

Additions shown in blue underline; deletions shown in ~~red-strikeout~~

Revision Date: 09/11/2014

Page 5 of 28

DRAFT

SPECIFIC LANGUAGE OF PROPOSED REGULATIONS PROGRAM FOR RESPONSIBLE GAMBLING

1 **§ 12464. Self-Exclusion Program.**

2 (a) Licensees shall ~~establish and~~ implement, ~~by July 1, 2007,~~ a program that allows
3 patrons to self-exclude themselves from gambling establishments using a form entitled Self-
4 Exclusion Request Form, CGCC-037 (Rev. ~~07XX/134~~), attached in Appendix A to this chapter.
5 ~~Such That~~ program shall contain, at a minimum, the following:

6 (1) Policies and procedures for providing Self-Exclusion Request forms and for sending
7 any completed Self-Exclusion Request forms to the Bureau;

8 (2) Policies and procedures for maintaining and updating a list of self-excluded persons,
9 wherein the confidentiality of the list is protected pursuant to Section 12466 and only agents or
10 employees have access, unless needed by ~~Bureau staff or~~ law enforcement pursuant to an
11 investigation or in assisting in a Problem Gambling program by an entity approved by the
12 Commission;

13 (3) Policies and procedures designed to thwart self-excluded patrons, as noticed by the
14 Bureau, from entering the gambling area during the term of exclusion, with the exception of
15 access for the sole purpose of carrying out the duties of employment, including removal
16 procedures for patrons who attempt entry after requesting to be excluded and notification to the
17 Bureau of any incidents of removals, ~~where the police and/or security are called to remove a~~
18 ~~person from the premises;~~

19 (4) Policies and procedures for checking the list of self-excluded persons any time a
20 patron's, identity is verified;

21 (5) Policies and procedures for the forfeiture of any money or prizes won or any losses
22 recovered by an excluded person and the remittance of such for deposit into the Gambling
23 Addiction Program Fund for problem gambling prevention and treatment services through the
24 State Department of Public Health, Office of Problem and Pathological Gambling;

25 (6)(5) Policies and procedures for removal of a patron from customer lists maintained by
26 the licensee for direct mail marketing, telephone marketing, and other direct marketing regarding
27 gaming opportunities or promotions at the gambling establishment;

28 (7)(6) Policies and procedures for removal of a patron from check-cashing, credit, or

DRAFT

Additions shown in blue underline; deletions shown in ~~red-strikeout~~

Revision Date: 09/11/2014

Page 6 of 28

DRAFT

SPECIFIC LANGUAGE OF PROPOSED REGULATIONS PROGRAM FOR RESPONSIBLE GAMBLING

1 marketing opportunities by the licensee.

2 (b) This section does not mandate that a licensee provide the services of a notary public
3 for persons who wish to complete the Self-Exclusion [Request](#) form.

4 Note: Authority cited: Sections 19811, 19840, 19841(o) and 19920, Business and Professions Code. Reference:
5 Sections 19801, 19920 and 19954, Business and Professions Code; and Section 4369.4, Welfare and Institutions
6 Code.

7

8 **OPTION 1 – Lifetime is a minimum of 4 years with 1 year cool down after removal request**
9 **§ 12465. Removal from the List of Self-Excluded Persons.**

10 (a) For any lifetime self-exclusion term, a request for removal from the list of self-
11 excluded persons may be submitted to the Bureau at any time after four years from the effective
12 date of the original self-exclusion request. A request for removal shall be submitted using the
13 form Self-Exclusion Removal Request, CGCC-0XX (New XX/14), attached in Appendix A to
14 this chapter.

15 (b) For any self-exclusion term, other than lifetime, the excluded person shall be
16 automatically removed from the list of self-excluded persons upon the conclusion of the
17 requested term. For a lifetime self-exclusion term, the Bureau shall remove the excluded person
18 from the list of self-excluded persons one year after receiving a request pursuant to subsection
19 (a). Upon removal, the Bureau shall send a notice to the person as confirmation of the removal
20 from the self-exclusion list.

21 Note: Authority cited: Sections 19811, 19840, 19841(o) and 19920, Business and Professions Code. Reference:
22 Sections 19801, 19920 and 19954, Business and Professions Code; and Section 4369.4, Welfare and Institutions
23 Code.

24

25 **OPTION 2 – No Defined Exclusion Periods**

26 **§ 12465. Removal from the List of Self-Excluded Persons.**

27 (a) To request removal from the list of self-excluded persons a request for removal shall
28 be submitted using the form Self-Exclusion Removal Request, CGCC-0XX (New XX/14),
29 attached in Appendix A to this chapter.

30 (b) The Bureau shall remove the excluded person from the list of self-excluded persons
31 one year after receiving a request pursuant to subsection (a). Upon removal, the Bureau shall

DRAFT

Additions shown in [blue underline](#); deletions shown in ~~red-strikeout~~

Revision Date: 09/11/2014

Page 7 of 28

DRAFT

SPECIFIC LANGUAGE OF PROPOSED REGULATIONS PROGRAM FOR RESPONSIBLE GAMBLING

1 send a notice to the person as confirmation of the removal from the self-exclusion list.

2 Note: Authority cited: Sections 19811, 19840, 19841(o) and 19920, Business and Professions Code. Reference:
3 Sections 19801, 19920 and 19954, Business and Professions Code; and Section 4369.4, Welfare and Institutions
4 Code.

5

6 **OPTION 3 – Repeal the Statewide Self-Exclusion Program**

7 *This option would repeal the statewide Self-Exclusion program. This would limit a patron's*
8 *ability to exclude him or herself to only being able to request inclusion in site-specific programs*
9 *(Self-Restriction programs). This option would include modifying the current Self-Restriction*
10 *program to provide a higher level of specificity, no fixed restriction time frames, or possibly*
11 *including provisions for removal similar to either Option 1 or Option 2. This option would*
12 *require other conforming changes in other sections.*

13

14 **12466. Responsible Gambling Program Review.**

15 (a)(1) ~~The Executive Director, or Bureau staff~~ may require that any licensee make
16 available for review or submit any of the elements of its program described in this Article, ~~to~~
17 ~~the Executive Director or Bureau staff~~ for review and may make a determination that the
18 licensee's program does not adequately address the standards set forth in this article. If the
19 ~~Bureau~~ Commission makes such ~~an administrative~~ determination ~~that the licensee's program does~~
20 ~~not adequately address the standards as set forth in this article,~~ then ~~the Executive Director may~~
21 ~~issue such~~ a determination notice may be issued by the Bureau identifying the deficiencies and
22 specifying a time certain within which those deficiencies shall be cured. ~~Judicial review of the~~
23 ~~Executive Director's decision is subject to the limitation of Business and Professions Code~~
24 ~~section 19804.~~

25 (2) Commission staff or Office of Problem and Pathological Gambling staff may request
26 that any licensee make available or submit any of the elements of its program described in this
27 article, to the requesting party, for review.

28 (b) Failure by a licensee to establish the programs set forth in this article, or to cure a
29 deficiency identified pursuant to paragraph (1) of subsection (a), shall constitute a ground for
30 disciplinary action under Chapter 10 of this division ~~an unsuitable method of operation and is in~~

DRAFT

DRAFT

SPECIFIC LANGUAGE OF PROPOSED REGULATIONS PROGRAM FOR RESPONSIBLE GAMBLING

1 ~~violation of this section.~~

2 (c) Protecting the confidentiality of self-restriction or self-exclusion lists includes:

3 (1) Not willfully disseminating self-excluded or self-restricted patrons' names, photos, or
4 other personally identifying information to third parties or confirming to third parties whether or
5 not a patron is on a self-exclusion or self-restriction list.

6 (2) Not posting self-excluded or self-restricted patron photos or other personally
7 identifying information in areas where other patrons would readily notice the information.

8 (d) In addition to any other remedy under the Act, the Commission may assess a
9 monetary penalty not exceeding \$1,000 for each violation of this article.

10 (e) This article does not create any right or cause of action on behalf of an individual who
11 participates in self-restriction or self-exclusion under this article against the state of California,
12 the California Gambling Control Commission, the Bureau of Gambling Control, the Office of
13 Problem and Pathological Gambling, or any gambling establishment.

14 Note: Authority cited: Sections 19811, 19840, 19841(o) and 19920, Business and Professions Code. Reference:
15 Sections 19801 and 19920, Business and Professions Code; and Section 4369.4, Welfare and Institutions Code.

16

17

18

19

20

21

22

23

24

25

26

27

28

29

DRAFT

Additions shown in blue underline; deletions shown in ~~red-strikeout~~

Revision Date: 09/11/2014

Page 9 of 28

APPENDIX A



State of California
California Gambling Control Commission
 2399 Gateway Oaks Drive, Suite 220
 Sacramento, CA 95833-4231
 (916) 263-0700; Fax: (916) 263-0452
www.cgcc.ca.gov

SELF-RESTRICTION FORM

CGCC – 036 (Rev. 07/13)

Type or print (in ink) all information requested on this form.
 If additional space is needed, please note response on a separate sheet of paper and attach to the form.

SECTION 1: PERSONAL INFORMATION

Full Legal Name:

First	Middle (if applicable)	Last

Other Names (Former Names (such as Maiden names), Nicknames, or Aliases / A.K.A.'s):

Home Address:

Street	City	State	Zip Code

Mailing Address (if different than Home Address):

Street	City	State	Zip Code

Home Telephone Number:

()

Business Number:

()

Games most often played:

SECTION 2: RESTRICTION FOR _____ (Name of Cardroom or participating gambling facility)

TOTAL EXCLUSION: Initial Appropriate Term: One Year _____ Five Years _____ Lifetime _____

Please delete me from any MARKETING or PROMOTIONAL information:

Please exclude me from this GAME or GAMING ACTIVITY _____

Please restrict me from any CHECK-CASHING privileges: Or Limit as follows _____

Please restrict me from any CREDIT: Or Limit as follows: _____

SECTION 3: PHOTO AND VISUAL DESCRIPTION

Gender: Male Female Date of Birth: / / Race/Ethnicity:

Height: Weight: Hair Color/Type: Eye Color:

Date of Photograph: / / CA Drivers License:

Distinguishing marks (such as visible scars or tattoos – describe mark & location):

Type of vehicle normally driven:

License Plate:

**AFFIX A RECENT
 PASSPORT QUALITY
 PHOTOGRAPH
 HERE SHOWING
 HEAD AND
 SHOULDERS OF
 PERSON TO BE
 EXCLUDED**

SECTION 4: DECLARATION

I understand English or have had an interpreter read and explain this form to me from _____
(Language)

I understand that the ultimate responsibility to limit my access to the Gambling Establishment or participating gambling facility or gaming services in the State of California remains mine alone.

I voluntarily seek to exclude or restrict myself as indicated in Section 2.

If I choose Total Exclusion:

(Initial) I agree that I will not attempt to enter and/or use any of the services or privileges of a California Gambling Establishment or participating gambling facility during the period checked in Section 2.

(Initial) I acknowledge and understand that should I attempt to enter a California Gambling Establishment or participating gambling facility or use the services of a Gambling Establishment or participating gambling facility during the Term of Exclusion, once identified, I shall be escorted from the Gambling Establishment or participating gambling facility and any winnings or prizes I may have accrued or losses recovered will be confiscated and remitted by the Gambling Establishment or participating gambling facility for deposit into the Gambling Addiction Program Fund for problem gambling prevention and treatment services through the State Department of Public Health, Office of Problem and Pathological Gambling.

(Initial) This self-exclusion request is **irrevocable** during the time period checked in Section 2.

I understand that disclosure of certain information is necessary to effect my request for self-exclusion or restriction. Disclosure may also occur if needed for the conduct of an official investigation or if ordered by a court of competent jurisdiction.

I will not seek to hold the Gambling Establishment or participating gambling facility liable in any way should I enter a Gambling Establishment or participating gambling facility and/or use any of the services or privileges therein despite this exclusion/restriction request, and I agree to indemnify the State of California, the California Gambling Control Commission, the Bureau of Gambling Control and the Office of Problem Gambling for any liability relating to this request. Specifically, I for myself, my heirs, executors, administrators, successors, and assigns, hereby release and forever discharge the California Gambling Control Commission, the Bureau of Gambling Control, the Office of Problem Gambling, the Gambling Establishment, participating gambling facility, their agents, employees, officers, and Directors and those with whom they may lawfully share information regarding this exclusion or restriction (collectively, the "Released Parties") from any and all claims in law or equity that I now have, or may have in the future, against all or any of all of the Released Parties arising out of, or by reason of, the performance or non-performance of this self-exclusion/restriction request, or any matter relating thereto. I further agree, in consideration for the Released Parties' efforts to implement my exclusion or restriction, to indemnify and hold harmless the Released Parties to fullest extent permitted by law for any and all liabilities, judgments, damages, and expenses of any kind, including reasonable attorneys' fees, resulting from or in connection with the performance or non-performance of the self-exclusion/restriction requested herein.

I declare that all information submitted on or with this self-restriction form is true, correct, and complete.

Signature: _____

Print Name: _____ Date: _____
[] [] / [] / []

SECTION 5: NOTARIZATION

Subscribed and sworn to (or affirmed) before me this _____ day of _____, 20____,

By _____
 personally known to me OR proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Notary Public Seal:

Signature _____
My Commission expires on: [] / [] / []

OR

WITNESS BY KEY EMPLOYEE

As a Key Employee of _____, I affirm that on _____ day of _____, 20____,

I witnessed _____
(individual's name)

complete this form and that this person is:
 personally known to me OR
 proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Signature of Key Employee _____

Printed Name _____

SECTION 4: DECLARATION

I understand English or have had an interpreter read and explain this form to me in _____ (Language)

(Initial)

I voluntarily seek to exclude myself as specified in Section 2 of this form.

(Initial)

I agree that I will not attempt to enter and/or use any of the services or privileges of a California gambling establishment or participating gambling facility during the period specified in Section 2.

(Initial)

I acknowledge and understand that should I attempt to enter a California gambling establishment or participating gambling facility or use the services of a gambling establishment or participating gambling facility during the term of exclusion, once identified, I shall be escorted from the gambling establishment or participating gambling facility and any winnings or prizes I may have accrued or losses recovered will be confiscated and remitted by the gambling establishment or participating gambling facility for deposit into the Gambling Addiction Program Fund for problem gambling prevention and treatment services through the State Department of Public Health, Office of Problem and Pathological Gambling.

(Initial)

I understand that the ultimate responsibility to limit my access to the gambling establishment or participating gambling facility or gaming services in the State of California remains mine alone.

(Initial)

This self-exclusion request is **irrevocable** during the time period checked in Section 2.

(Initial)

I understand that disclosure of certain information is necessary to effect my request for self-exclusion.

I understand that my information will be added to a statewide exclusion database. Disclosure may also occur if needed for the conduct of an official investigation or if ordered by a court of competent jurisdiction.

I will not seek to hold the gambling establishment or participating gambling facility liable in any way should I enter a gambling establishment or participating gambling facility and/or use any of the services or privileges therein despite this exclusion request, and I agree to indemnify the State of California, the California Gambling Control Commission, the Bureau of Gambling Control, and the Office of Problem Gambling for any liability relating to this request. Specifically, I for myself, my heirs, executors, administrators, successors, and assigns, hereby release and forever discharge the California Gambling Control Commission, the Bureau of Gambling Control, the Office of Problem Gambling, the Gambling Establishment or participating gambling facility, their agents, employees, officers, and Directors and those with whom they may lawfully share information regarding this exclusion (collectively, the "Released Parties") from any and all claims in law or equity that I now have, or may have in the future, against all or any of all of the Released Parties arising out of, or by reason of, the performance or non-performance of this self-exclusion request, or any matter relating thereto. I further agree, in consideration for the Released Parties' efforts to implement my exclusion, to indemnify and hold harmless the Released Parties to fullest extent permitted by law for any and all liabilities, judgments, damages, and expenses of any kind, including reasonable attorneys' fees, resulting from or in connection with the performance or non-performance of the self-exclusion requested herein.

I declare that all information submitted on or with this self-exclusion form is true, correct, and complete.

Signature: _____

Print Name: _____ Date: _____

SECTION 5: NOTARIZATION

Subscribed and sworn to (or affirmed) before me this _____ day of _____, 20_____.

By _____
 personally known to me OR proved to me on the basis of satisfactory evidence to be the person who appeared before me.
Notary Public Seal:

Signature of Notary Public _____
My Commission expires on:

OR

WITNESS BY KEY EMPLOYEE

As a Key Employee of _____, I affirm that on _____ (name of establishment or participating facility)

_____ day of _____, 20_____.

I witnessed _____ (individual's name)

complete this form and that this person is:

personally known to me OR proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Signature of Key Employee _____

Printed Name _____



State of California
California Gambling Control Commission
 2399 Gateway Oaks Drive, Suite 220
 Sacramento, CA 95833-4231
 (916) 263-0700; Fax: (916) 263-0452
 www.cgcc.ca.gov

SELF-RESTRICTION REQUEST

CGCC – 036 (Rev. **XX/14**)

RESTRICTION FOR _____ (Name of cardroom or participating gambling facility)

Disclaimer: This request only pertains to the above gambling establishment and does not apply statewide.

Type or print (in ink) all information requested on this form.
 If additional space is needed, please note response on a separate sheet of paper and attach to the form.

SECTION 1: PERSONAL INFORMATION

Full Legal Name:

First	Middle	Last
Other Names [Former Names (such as Maiden names), Nicknames, or Aliases / A.K.A.'s]:		
Street	City	State Zip Code
Home Telephone Number	Business Number	Email Address
Games most often played		

Mailing Address (if different than Home Address):

Street	City	State	Zip Code
--------	------	-------	----------

SECTION 2: RESTRICTION REQUEST

INITIAL REQUESTED TERM: One Year _____ Five Years _____ Lifetime _____

- Restrict me from any **MARKETING** or **PROMOTIONAL** information
- Restrict me from this **GAME** or **GAMING ACTIVITY**: _____
- Restrict me from any **CHECK-CASHING** privileges; or Limit as follows: _____
- Restrict me from any **CREDIT**; or Limit as follows: _____
- TOTAL RESTRICTION** (restrict me from all of the above)

SECTION 3: PHOTO AND VISUAL DESCRIPTION

Gender: Male Female

	Date of Birth	Race/Ethnicity
Date of Photograph	Height	Weight
	Hair Color/Type	Eye Color
AFFIX A RECENT PASSPORT QUALITY PHOTOGRAPH HERE SHOWING HEAD AND SHOULDERS OF PERSON TO BE EXCLUDED	CA Drivers License	Type of vehicle normally driven
	License Plate Number	
Distinguishing marks (such as visible scars or tattoos – describe mark & location)		

SECTION 4: DECLARATION

I understand English or have had an interpreter read and explain this form to me in _____
(Language)

I understand that the ultimate responsibility to limit my access to the Gambling Establishment or participating gambling facility or gaming services in the State of California remains mine alone.

I voluntarily seek to exclude or restrict myself as indicated in Section 2.

I understand that disclosure of certain information is necessary to effect my request for self-restriction. Disclosure may also occur if needed for the conduct of an official investigation or if ordered by a court of competent jurisdiction.

I will not seek to hold the Gambling Enterprise or participating gambling facility liable in any way should I enter the Gambling Establishment or participating gambling facility or use any of the services or privileges therein despite this restriction request, and I agree to indemnify the State of California, the California Gambling Control Commission, the Bureau of Gambling Control and the Office of Problem and Pathological Gambling for any liability relating to this request. Specifically, I for myself, my heirs, executors, administrators, successors, and assigns, hereby release and forever discharge the California Gambling Control Commission, the Bureau of Gambling Control, the Office of Problem and Pathological Gambling, the Gambling Enterprise, participating gambling facility, their agents, employees, officers, and Directors and those with whom they may lawfully share information regarding this restriction (collectively, the "Released Parties") from any and all claims in law or equity that I now have, or may have in the future, against all or any of the Released Parties arising out of, or by reason of, the performance or non-performance of this self-restriction request, or any matter relating thereto. I further agree, in consideration for the Released Parties' efforts to implement my restriction, to indemnify and hold harmless the Released Parties to fullest extent permitted by law for any and all liabilities, judgments, damages, and expenses of any kind, including reasonable attorneys' fees, resulting from or in connection with the performance or non-performance of the self-restriction requested herein.

If I choose Total Restriction:

(Initial here) I agree that I will not attempt to enter or use any of the services or privileges of the indicated Gambling Establishment or participating gambling facility during the period checked in Section 2.

(Initial here) I acknowledge and understand that should I attempt to enter the indicated Gambling Establishment or participating gambling facility or use the services of the Gambling Enterprise or participating gambling facility during the term of restriction, once identified, I shall be escorted from the Gambling Establishment or participating gambling facility.

(Initial here) I agree that any winnings or prizes I may have accrued or losses recovered will be forfeited and remitted by the Gambling Enterprise or participating gambling facility for deposit into the Gambling Addiction Program Fund for problem gambling prevention and treatment services through the State Department of Public Health, Office of Problem and Pathological Gambling.

(Initial here) This self-restriction request is **irrevocable** during the time period checked in Section 2.

I declare that all information submitted on or with this self-restriction form is true, correct, and complete.

Signature	Date
Print Name	

SECTION 5: NOTARIZATION

Subscribed and sworn to (or affirmed) before me this _____ day of _____, 20_____,

By _____,
 personally known to me OR proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Notary Public Seal:

Signature of Notary Public _____

My Commission expires on

OR

WITNESS BY KEY EMPLOYEE

As a Key Employee of _____, I affirm that on _____ (name of Establishment or participating facility) _____ day of _____, 20_____,

I witnessed _____ (individual's name),

complete this form and that this person is:

personally known to me OR proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Signature of Key Employee _____

Printed Name _____

OPTION 1



State of California
California Gambling Control Commission
 2399 Gateway Oaks Drive, Suite 220
 Sacramento, CA 95833-4231
 (916) 263-0700; Fax: (916) 263-0452
 www.cgcc.ca.gov

SELF-EXCLUSION REQUEST

CGCC – 037 (Rev. XX/14)

Disclaimer: This request applies to all gambling establishments licensed by the California Gambling Control Commission.

Type or print (in ink) all information requested on this form.

If additional space is needed, please note response on a separate sheet of paper and attach to the form.

You may hand this completed form in to any cardroom or participating gambling facility, to the Bureau of Gambling Control, or the California Gambling Control Commission, or you may mail this completed form to: **BUREAU OF GAMBLING CONTROL, Post Office Box 168024, Sacramento, CA 95816-8024.**

SECTION 1: PERSONAL INFORMATION

Full Legal Name:

First	Middle	Last
Other Names [Former Names (such as Maiden names), Nicknames, or Aliases / A.K.A.'s]:		
Street	City	State Zip Code
Home Telephone Number	Business Number	Email Address
Games most often played		

Mailing Address (if different than Home Address):

Street	City	State	Zip Code
--------	------	-------	----------

SECTION 2: TERM OF EXCLUSION

Please Initial Requested Term: One Year _____ Five Years _____ Lifetime _____

SECTION 3: PHOTO AND VISUAL DESCRIPTION

Gender: Male Female

	Date of Birth	Race/Ethnicity
Date of Photograph	Height	Weight
	Hair Color/Type	Eye Color
AFFIX A RECENT PASSPORT QUALITY PHOTOGRAPH HERE SHOWING HEAD AND SHOULDERS OF PERSON TO BE EXCLUDED	CA Drivers License	Type of vehicle normally driven
	License Plate Number	
	Distinguishing marks (such as visible scars or tattoos – describe mark & location)	

SECTION 4: DECLARATION

I understand English or have had an interpreter read and explain this form to me in _____.
(Language)

- (Initial here) I voluntarily seek to exclude myself as specified in Section 2 of this form.
- (Initial here) I agree that I will not attempt to enter or use any of the services or privileges of a California Gambling Establishment or participating gambling facility during the period specified in Section 2.
- (Initial here) I acknowledge and understand that should I attempt to enter any Gambling Establishment or participating gambling facility or use the services of any Gambling Enterprise or participating gambling facility during the Term of Exclusion, once identified, I shall be escorted from the Gambling Establishment or participating gambling facility.
- (Initial here) I agree that any winnings or prizes I may have accrued or losses recovered will be forfeited and remitted by the Gambling Enterprise or participating gambling facility for deposit into the Gambling Addiction Program Fund for problem gambling prevention and treatment services through the State Department of Public Health, Office of Problem and Pathological Gambling.
- (Initial here) I understand that the ultimate responsibility to limit my access to the gambling establishment or participating gambling facility or gaming services in the State of California remains mine alone.
- (Initial here) I understand that disclosure of certain information is necessary to effect my request for self-exclusion. I understand that my information will be added to a statewide exclusion database. Disclosure may also occur if needed for the conduct of an official investigation or if ordered by a court of competent jurisdiction.
- (Initial here) I understand that this self-exclusion request is **irrevocable** during the time period checked. Removal from a lifetime request will require the submission of a Self-Exclusion Removal Request, form CGCC-0XX (New. XX/14).

I will not seek to hold the gambling enterprise or participating gambling facility liable in any way should I enter a gambling establishment or participating gambling facility or use any of the services or privileges therein despite this exclusion request, and I agree to indemnify the State of California, the California Gambling Control Commission, the Bureau of Gambling Control, and the Office of Problem and Pathological Gambling for any liability relating to this request. Specifically, I for myself, my heirs, executors, administrators, successors, and assigns, hereby release and forever discharge the California Gambling Control Commission, the Bureau of Gambling Control, the Office of Problem and Pathological Gambling, the Gambling Enterprise or participating gambling facility, their agents, employees, officers, and Directors and those with whom they may lawfully share information regarding this exclusion (collectively, the "Released Parties") from any and all claims in law or equity that I now have, or may have in the future, against all or any of the Released Parties arising out of, or by reason of, the performance or non-performance of this self-exclusion request, or any matter relating thereto. I further agree, in consideration for the Released Parties' efforts to implement my exclusion, to indemnify and hold harmless the Released Parties to fullest extent permitted by law for any and all liabilities, judgments, damages, and expenses of any kind, including reasonable attorneys' fees, resulting from or in connection with the performance or non-performance of the self-exclusion requested herein.

I declare that all information submitted on or with this self-exclusion form is true, correct, and complete.

Signature	Date
Print Name	

SECTION 5: NOTARIZATION

Subscribed and sworn to (or affirmed) before me this _____ day of _____, 20____,

By _____,
 personally known to me OR proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Notary Public Seal:

Signature of Notary Public _____

My Commission expires on _____

OR

WITNESS BY KEY EMPLOYEE

As a Key Employee of _____, I affirm that on _____ (name of Establishment or participating facility) _____ day of _____, 20____,

I witnessed _____ (individual's name),

complete this form and that this person is:

personally known to me OR proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Signature of Key Employee _____

Printed Name _____



State of California
 2399 Gateway Oaks Drive, Suite 220
 Sacramento, CA 95833-4231
 (916) 263-0700; Fax: (916) 263-0452
 www.cgcc.ca.gov

Self-Exclusion Removal Request

CGCC – 0XX (New XX/14)

Type or print (in ink) all information requested on this form.
 If additional space is needed, please note response on a separate sheet of paper and attach to this completed form.
 You may mail this completed form to: **BUREAU OF GAMBLING CONTROL, Post Office Box 168024, Sacramento, CA 95816-8024.**

SECTION 1: PERSONAL INFORMATION

Full Legal Name:

First	Middle	Last
Other Names [Former Names (such as Maiden names), Nicknames, or Aliases / A.K.A.'s]:		
Street	City	State Zip Code
Home Telephone Number	Business Number	Email Address

Mailing Address (if different than Home Address):

Street	City	State	Zip Code
--------	------	-------	----------

SECTION 2: EXCLUSION

Effective date of exclusion: _____

SECTION 3: DECLARATION

I understand English or have had an interpreter read and explain this form to me in _____
(Language)

- (Initial here) I voluntarily seek to remove myself from the list of self-excluded persons.
- (Initial here) I understand that a gambling establishment is not required to allow me re-admittance for the purpose of gambling, at their sole discretion.
- (Initial here) I understand that my removal from the list of self-excluded persons will not be effective until I have received an acknowledgement from the Department of Justice, Bureau of Gambling Control.

I agree to indemnify the State of California, the California Gambling Control Commission, the Bureau of Gambling Control, the Office of Problem and Pathological Gambling and any gambling enterprise for any liability relating to this request. Specifically, I for myself, my heirs, executors, administrators, successors, and assigns, hereby release and forever discharge the California Gambling Control Commission, the Bureau of Gambling Control, the Office of Problem and Pathological Gambling, the Gambling Enterprise or participating gambling facility, their agents, employees, officers, and Directors from any and all claims in law or equity that I now have, or may have in the future, against all or any of the Released Parties arising out of, or by reason of, the actions (or gambling losses) that may occur upon my return to a gambling establishment.

I declare that all information submitted on or with this self-exclusion removal request form is true, correct, and complete.

Signature	Date
Print Name	

OPTION 2



State of California
California Gambling Control Commission
 2399 Gateway Oaks Drive, Suite 220
 Sacramento, CA 95833-4231
 (916) 263-0700; Fax: (916) 263-0452
 www.cgcc.ca.gov

SELF-EXCLUSION REQUEST

CGCC – 037 (Rev. **XX/14**)

Disclaimer: This request applies to all gambling establishments licensed by the California Gambling Control Commission.

Type or print (in ink) all information requested on this form.

If additional space is needed, please note response on a separate sheet of paper and attach to the form.

You may hand this completed form in to any cardroom or participating gambling facility, to the Bureau of Gambling Control, or the California Gambling Control Commission, or you may mail this completed form to: **BUREAU OF GAMBLING CONTROL, Post Office Box 168024, Sacramento, CA 95816-8024.**

SECTION 1: PERSONAL INFORMATION

Full Legal Name:

First	Middle	Last
Other Names [Former Names (such as Maiden names), Nicknames, or Aliases / A.K.A.'s]:		
Street	City	State Zip Code
Home Telephone Number	Business Number	Email Address
Games most often played		

Mailing Address (if different than Home Address):

Street	City	State	Zip Code
--------	------	-------	----------

SECTION 2: PHOTO AND VISUAL DESCRIPTION

Gender: Male Female

	Date of Birth	Race/Ethnicity
Date of Photograph	Height	Weight
	Hair Color/Type	Eye Color
AFFIX A RECENT PASSPORT QUALITY PHOTOGRAPH HERE SHOWING HEAD AND SHOULDERS OF PERSON TO BE EXCLUDED	CA Drivers License	Type of vehicle normally driven
	License Plate Number	
Distinguishing marks (such as visible scars or tattoos – describe mark & location)		

SECTION 3: DECLARATION

I understand English or have had an interpreter read and explain this form to me in _____.
(Language)

- (Initial here) I voluntarily seek to exclude myself as specified in Section 2 of this form.
- (Initial here) I agree that I will not attempt to enter or use any of the services or privileges of a California gambling establishment or participating gambling facility in Section 2.
- (Initial here) I acknowledge and understand that should I attempt to enter any Gambling Establishment or participating gambling facility or use the services of any Gambling Establishment or participating gambling facility during the Term of Exclusion, once identified, I shall be escorted from the Gambling Establishment or participating gambling facility.
- (Initial here) I agree that any winnings or prizes I may have accrued or losses recovered will be forfeited and remitted by the Gambling Enterprise or participating gambling facility for deposit into the Gambling Addiction Program Fund for problem gambling prevention and treatment services through the State Department of Public Health, Office of Problem and Pathological Gambling.
- (Initial here) I understand that the ultimate responsibility to limit my access to the gambling establishment or participating gambling facility or gaming services in the State of California remains mine alone.
- (Initial here) I understand that disclosure of certain information is necessary to effect my request for self-exclusion. I understand that my information will be added to a statewide exclusion database. Disclosure may also occur if needed for the conduct of an official investigation or if ordered by a court of competent jurisdiction.
- (Initial here) I understand any removal will require the submission of a Self-Exclusion Removal Request, form CGCC-0XX (New. XX/14).

I will not seek to hold the gambling enterprise or participating gambling facility liable in any way should I enter a gambling establishment or participating gambling facility or use any of the services or privileges therein despite this exclusion request, and I agree to indemnify the State of California, the California Gambling Control Commission, the Bureau of Gambling Control, and the Office of Problem and Pathological Gambling for any liability relating to this request. Specifically, I for myself, my heirs, executors, administrators, successors, and assigns, hereby release and forever discharge the California Gambling Control Commission, the Bureau of Gambling Control, the Office of Problem and Pathological Gambling, the Gambling Enterprise or participating gambling facility, their agents, employees, officers, and Directors and those with whom they may lawfully share information regarding this exclusion (collectively, the "Released Parties") from any and all claims in law or equity that I now have, or may have in the future, against all or any of the Released Parties arising out of, or by reason of, the performance or non-performance of this self-exclusion request, or any matter relating thereto. I further agree, in consideration for the Released Parties' efforts to implement my exclusion, to indemnify and hold harmless the Released Parties to fullest extent permitted by law for any and all liabilities, judgments, damages, and expenses of any kind, including reasonable attorneys' fees, resulting from or in connection with the performance or non-performance of the self-exclusion requested herein.

I declare that all information submitted on or with this self-exclusion form is true, correct, and complete.

Signature	Date
Print Name	

SECTION 4: NOTARIZATION

Subscribed and sworn to (or affirmed) before me this _____ day of _____, 20_____,

By _____,

personally known to me OR proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Notary Public Seal:

Signature of Notary Public _____

My Commission expires on _____

OR

WITNESS BY KEY EMPLOYEE

As a Key Employee of _____, I affirm that on _____ (name of Establishment or participating facility), I _____ day of _____, 20_____,

I witnessed _____, (individual's name),

complete this form and that this person is:

personally known to me OR

proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Signature of Key Employee _____

Printed Name _____