

1 CALIFORNIA GAMBLING CONTROL COMMISSION
2 SPECIFIC LANGUAGE OF PROPOSED REGULATIONS
3 Program for Responsible Gambling
4 CGCC-GCA-2015-01-R
5

6 TITLE 4. BUSINESS REGULATIONS.

7 DIVISION 18. CALIFORNIA GAMBLING CONTROL COMMISSION.

8 CHAPTER 7. CONDITIONS OF OPERATION FOR GAMBLING ESTABLISHMENTS.
9

10 ARTICLE 6. PROGRAM FOR RESPONSIBLE GAMBLING.

11 § 12460. Article Definitions.

12 For purposes of this Article:

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

18 (b) "Self-Restriction" means ~~an irrevocable~~ voluntary agreement with a single gambling
19 enterprise that is irrevocable for a specified term to:

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

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

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

27 (4) Be restricted ~~Exclude~~ from all direct ~~any~~ marketing or promotional activities conducted
28 by or on behalf of the particular gambling ~~enterprise~~ establishment where any of the patron's
29 information ~~name~~ for direct marketing matches the information ~~name~~ on the exclusion.

Additions shown in underline; deletions shown in ~~strikeout~~
Double underline and ~~Double strikeout~~ denote 1st modified text.

Underline and ~~strikeout~~ denote 2nd modified text.

Revision Date: 10/06/2015

Page 1 of 22

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

3
4 **§ 12461. Posting Referral Information.**

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

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

16 (c) Advertising material ~~If the licensee~~ produced ~~s~~ by or on behalf of any advertising
17 ~~material~~ gambling enterprise, TPPPS or gambling business, ~~by July 1, 2007, such material~~ shall
18 contain a responsible gambling message and shall refer to the telephone number listed in
19 subsection (a) above ~~and/or the link to~~ the web-site listed in subsection (b) above, or both. This
20 provision applies to any advertisement that will be distributed by television, radio, outdoor
21 display, flyer, mail or digitally. This provision does not apply to:

22 (1) Any digital material with limited characters or space that ~~is intended to only provides~~
23 a “pass through” link to a website that complies with subsection (b).

24 (2) Any promotional item in which size or space limitations do not allow the responsible
25 gambling message to be legibly displayed, such as: pens, key chains, hats, drinking glasses,
26 coffee mugs, etc.

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

30
Additions shown in underline; deletions shown in ~~strikeout~~
Double underline and ~~Double strikeout~~ denote 1st modified text.

Underline and ~~strikeout~~ denote 2nd modified text.

Revision Date: 10/06/2015

Page 2 of 22

1 § 12462. Training Requirements.

2 (a) Each licensee shall have ~~establish and implement, by July 1, 2007,~~ procedures for
3 providing to conduct new employee orientations and annual training concerning problem
4 gambling for all employees ~~excluding food and beverage servers,~~ who interact with gambling
5 patrons in gambling areas. A licensee may develop an internal training program, may use a
6 third-party training program, or may use a training program developed and provided by the
7 Office of Problem and Pathological Gambling. ~~At a minimum, orientations and training shall~~
8 ~~include the following employee groups:~~

9 ~~(1) Any employee described in subsection (a), including but not limited to, food and~~
10 ~~beverage providers, with duties not related to the operation of a controlled game;~~

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

13 ~~(3) Any key employee described in subsection (a);~~

14 (b)(1) New employee orientations ~~and annual training shall be documented, including~~
15 ~~signatures by the employee and the licensee or key employee who coordinated the training, the~~
16 ~~date and length of the training, and the name of the trainer, as part of the licensee's application~~
17 ~~for renewal. Copies of this documentation shall be kept in an employee's personnel file for a~~
18 ~~minimum of five years.~~ shall be completed within 60 days of the issuance of a license or work
19 permit, or the employee's start date, whichever is later.

20 (2) Annual training must be provided to each employee following the calendar year in
21 which a new employee orientation was provided. Annual training may be completed in
22 segments provided that the entire requirement is met during each calendar year.

23 (3) Each licensee shall designate personnel responsible for maintaining the program,
24 coordinating training, and documenting employee completion. The program shall be reviewed at
25 least once a year to ensure that the information provided is current. ~~Records~~ Copies of employee
26 completion documentation shall be maintained in accordance with Section 12003, ~~kept on file for~~
27 a minimum of five years and shall include the date of the training, the topics covered, the
28 name and signatures of the employee receiving the training and the name of the employee

Additions shown in underline; deletions shown in ~~strikeout~~
Double underline and ~~Double strikeout~~ denote 1st modified text.

Underline and ~~strikeout~~ denote 2nd modified text.

Revision Date: 10/06/2015

Page 3 of 22

1 responsible for coordinating training. Training records may include, but need not be limited to,
2 sign-in sheets and training certificates.

3 (c) ~~The training programs for new employee orientation and annual training shall, at a~~ At a
4 minimum, the following employee groups shall have training, as specified ~~consist of:~~

5 (1) Employees, and supervisors of employees, whose duties include interacting with
6 gambling patrons in gambling areas, but do not have duties related to the operation of the games,
7 such as food and beverage providers, shall receive training ~~Information~~ concerning the nature
8 and symptoms of problem gambling behavior. ~~;~~

9 (2) Employees, and supervisors of employees, whose duties include interacting with
10 gambling patrons in gambling areas and who have duties related to the operation of a controlled
11 game shall receive the training specified in paragraph (1) and training on ~~How to~~ assisting
12 patrons in obtaining information about problem gambling programs. ~~;~~ ~~and~~

13 (3) Key employees shall receive the training specified in paragraph (2), and shall receive
14 ~~Information~~ on the self-restriction and self-exclusion programs; ~~(4) Information about any~~
15 ~~treatment options~~ help and prevention programs ~~services~~ offered by the State Department of
16 Public Health, Office of Problem and Pathological Gambling; ~~and;~~ may receive ~~(5) Information~~
17 about any problem gambling programs or services available in and around the location of the
18 gambling establishment.

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

23 ~~(2) New employee orientations and annual training for the employee group identified in~~
24 ~~paragraph (2) of subsection (a) shall include, at a minimum, the information specified in~~
25 ~~paragraphs (1) and (2) of subsection (c):~~

26 ~~(3) New employee orientations and annual training for the employee group identified in~~
27 ~~paragraph (3) of subsection (a) shall include, at a minimum, all of the information specified in~~
28 ~~subsection (c):~~

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

Additions shown in underline; deletions shown in ~~strikeout~~
Double underline and ~~Double strikeout~~ denote 1st modified text.

Underline and ~~strikeout~~ denote 2nd modified text.

Revision Date: 10/06/2015

Page 4 of 22

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

4
5 **§ 12463. Self-Restriction Program.**

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

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

12 (2) The development of written forms allowing patrons to participate in the program,
13 which may include use of a form entitled Self-Restriction ~~Request, Form,~~ CGCC-036 (Rev.
14 ~~0702/135~~), attached in Appendix A to this chapter;

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

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

25 (A) Removal procedures for patrons who attempt entry after requesting to be
26 ~~restricted~~~~excluded~~;

27 (B) Maintenance of records~~Notification to the Bureau~~ of any incidents of removals where
28 law enforcement is ~~the police and/or security are called to remove a person from the premises.~~
29 The records shall be accessible by Bureau staff or law enforcement personnel pursuant to an
30 investigation; and,

Additions shown in underline; deletions shown in ~~strikeout~~
Double underline and ~~Double strikeout~~ denote 1st modified text.

Underline and ~~strikeout~~ denote 2nd modified text.

Revision Date: 10/06/2015

Page 5 of 22

1 (C) Forfeiture of any unredeemed jackpots or prizes won ~~or any losses recovered~~
2 by an restricted ~~excluded~~ person and the remittance of the combined values ~~such~~ for deposit into
3 the Gambling Addiction Program Fund for problem gambling prevention and treatment services
4 through the State Department of Public Health, Office of Problem ~~and Pathological~~ Gambling;

5 (5) Policies and procedures that allow a patron to ~~limit or completely restrict his or~~
6 her ~~their~~ ~~be excluded from~~ access to check cashing or the issuance of credit during the term of
7 restriction; and.

8 (6) Policies and procedures that allow a patron to ~~limit or completely restrict him or~~
9 herself ~~them~~ ~~eselves~~ ~~be excluded~~ from customer lists maintained by the licensee for direct mail
10 marketing, telephone marketing, and other direct marketing regarding gaming opportunities or
11 promotions at the gambling establishment during the term of restriction; ;

12 ~~(7) Policies and procedures for removal of a patron from check cashing, credit, or~~
13 ~~marketing opportunities by the licensee.~~

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

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

19
20 **§ 12464. Self-Exclusion Program.**

21 (a) Licensees shall ~~establish and~~ implement, ~~by July 1, 2007,~~ a program that allows
22 patrons to ~~self~~-exclude themselves from gambling establishments using a form entitled Self-
23 Exclusion Request, ~~F~~form, CGCC-037 (Rev. ~~0702/135~~), attached in Appendix A to this chapter.
24 ~~Such~~ That program shall contain, at a minimum, the following:

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

27 (2) Policies and procedures for maintaining and updating a list of self-excluded persons,
28 wherein the confidentiality of the list is protected pursuant to Section 12466 and only agents or
29 employees have access, unless needed by ~~Bureau staff or~~ law enforcement personnel pursuant to

Additions shown in underline; deletions shown in ~~strikeout~~
Double underline and ~~Double strikeout~~ denote 1st modified text.

Underline and ~~strikeout~~ denote 2nd modified text.

Revision Date: 10/06/2015

Page 6 of 22

1 an investigation or in assisting in a Problem Gambling program ~~by an entity approved by the~~
2 ~~Commission;~~

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

9 (4) Policies and procedures for verifying ~~the verification of~~ a patron's identity and
10 checking the list of self-excluded persons before cashing a check, awarding a jackpot or prize,
11 extending credit and selling or redeeming chips, tokens or any other item of a monetary value if
12 the patron's identity would otherwise be verified;

13 (5) Policies and procedures for the forfeiture of any unredeemed jackpots ~~money~~ or prizes
14 won ~~or any losses recovered~~ by an excluded person and the remittance of the combined
15 values ~~such~~ for deposit into the Gambling Addiction Program Fund for problem gambling
16 prevention and treatment services through the State Department of Public Health, Office of
17 Problem ~~and Pathological~~ Gambling;

18 (6) ~~(5)~~ Policies and procedures for removal of a patron from customer lists maintained by
19 the licensee for direct mail marketing, telephone marketing, and other direct marketing or
20 marketing opportunities regarding gaming opportunities or promotions at the gambling
21 establishment; ~~and,~~

22 (7) ~~(6)~~ Policies and procedures for removal of a patron from check-cashing; or credit; ~~or~~
23 marketing opportunities by the licensee; and,

24 (8) Policies and procedures for mailing any patron-submitted Self-Exclusion Request
25 form to the Bureau within 10 business days.

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

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

Additions shown in underline; deletions shown in ~~strikeout~~
Double underline and ~~Double strikeout~~ denote 1st modified text.

Underline and ~~strikeout~~ denote 2nd modified text.

Revision Date: 10/06/2015

Page 7 of 22

1
2 **§ 12465. Removal from the List of Self-Excluded Persons.**

3 (a) For any lifetime self-exclusion term, a request for removal from the list of self-
4 excluded persons may be submitted to the Bureau at any time after ~~one~~four years from the
5 effective date of the original self-exclusion request. A request for removal shall be submitted
6 using the form Self-Exclusion Removal Request, CGCC-038 (New 02/15), attached in Appendix
7 A to this chapter. *The Bureau shall remove the excluded person from the list of self-excluded*
8 *persons on the first business day of the second whole month after the request was postmarked.*

9 (b) For any self-exclusion term, other than lifetime, the excluded person shall be
10 automatically removed from the list of self-excluded persons upon the conclusion of the
11 requested term. ~~*For a lifetime self exclusion term, the Bureau shall remove the excluded person*~~
12 ~~*from the list of self-excluded persons on the first business day of the second whole month*~~
13 ~~*one*~~
14 ~~*year after the receiving a request pursuant to subsection (a) was postmarked unless the excluded*~~
15 ~~*person submits a withdrawal request using the form Withdrawal of Self-Exclusion Removal*~~
16 ~~*Request, CGCC-039 (New 02/15), attached in Appendix A to this chapter.*~~

17 (c) Upon removal, the Bureau shall send a notice to the person as confirmation of the
18 removal from the self-exclusion list.

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

22 **§ 12466. Responsible Gambling Program Review.**

23 (a)(1) The ~~Executive Director, or~~ Bureau ~~staff~~ may require that any licensee provide to
24 the Bureau copies of the licensee's policies and procedures constituting its Program for
25 Responsible Gambling, which shall address all of the requirements of this~~make available for~~
26 ~~review or submit any of the elements of its program described in this a~~Article, to the Executive
27 ~~Director or Bureau staff for review.~~ If the Bureau~~Commission~~ makes an ~~administrative~~
28 determination that the licensee's program does not adequately address the standards as set forth
29 in this article, then ~~the Executive Director~~ the Bureau may issue ~~such a~~ determination notice
30 identifying the deficiencies and specifying a time certain within which those deficiencies shall be

Additions shown in underline; deletions shown in ~~strikeout~~
Double underline and ~~Double strikeout~~ denote 1st modified text.

Underline and ~~strikeout~~ denote 2nd modified text.

Revision Date: 10/06/2015

Page 8 of 22

1 cured. ~~Judicial review of the Executive Director's decision is subject to the limitation of~~
2 ~~Business and Professions Code section 19804.~~

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

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

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

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

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

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

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

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

24 ///

25 ///

26
27
28
29
Additions shown in underline; deletions shown in ~~strikeout~~
Double underline and ~~Double strikeout~~ denote 1st modified text.

Underline and ~~strikeout~~ denote 2nd modified text.

Revision Date: 10/06/2015

Page 9 of 22

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.

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 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 _____ (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 _____

SECTION 4: DECLARATION

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

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

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.

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.

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.

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.

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

OR

WITNESS BY KEY EMPLOYEE

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:

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. 02/15)

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
	CA Drivers License	Type of vehicle normally driven
	License Plate Number	
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin-bottom: 10px;"> AFFIX A RECENT PASSPORT QUALITY PHOTOGRAPH HERE SHOWING HEAD AND SHOULDERS OF PERSON TO BE EXCLUDED </div> 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 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 the 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 ~~unredeemed jackpots/winnings~~ or prizes I may have accrued 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 _____ 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-EXCLUSION REQUEST

CGCC – 037 (Rev. 02/15)

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.

Please submit ~~You may hand~~ this completed form ~~in~~ to any cardroom or participating gambling facility employee, to an employee of the Bureau of Gambling Control, 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 ~~unredeemed jackpots~~ ~~winnings~~ or prizes I may have accrued 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 California gambling establishments or participating gambling facilities 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-038 (New. 02/15).

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 the 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 _____

PRIVACY NOTICE

THE INFORMATION PRACTICES ACT OF 1977 (CIVIL CODE SECTION 1798.17) AND THE FEDERAL PRIVACY ACT (PUBLIC LAW 93-579) REQUIRE THAT THIS NOTICE BE PROVIDED WHEN COLLECTING PERSONAL INFORMATION FROM INDIVIDUALS. INFORMATION REQUESTED ON THIS FORM IS REQUIRED BY THE STATE OF CALIFORNIA, CALIFORNIA GAMBLING CONTROL COMMISSION AND THE DEPARTMENT OF JUSTICE, DIVISION OF LAW ENFORCEMENT, BUREAU OF GAMBLING CONTROL (BUREAU), PURSUANT TO BUSINESS AND PROFESSIONS CODE SECTIONS 19865 AND 19866. PERSONAL INFORMATION SHOULD ONLY BE PROVIDED IN THE SPACES INDICATED. THE BUREAU IS RESPONSIBLE FOR MAINTENANCE OF THE COMPLETED FORM.

IN ADDITION, ANY PERSONAL INFORMATION COLLECTED BY STATE AGENCIES IS SUBJECT TO THE LIMITATIONS IN THE INFORMATION PRACTICES ACT AND STATE POLICY. THE INFORMATION YOU PROVIDE MAY ALSO BE DISCLOSED IN THE FOLLOWING CIRCUMSTANCES: 1) TO ANOTHER GOVERNMENT AGENCY AS REQUIRED BY STATE OR FEDERAL LAW; OR 2) IN RESPONSE TO A COURT OR ADMINISTRATIVE ORDER, A SUBPOENA, OR A SEARCH WARRANT. PURSUANT TO BUSINESS AND PROFESSIONS CODE SECTION 19821, SUBDIVISION (C), THIS FORM IS EXEMPT FROM THE CALIFORNIA PUBLIC RECORDS ACT.

THE DEPARTMENT OF JUSTICE'S GENERAL POLICY IS AVAILABLE AT: <http://oag.ca.gov/privacy-policy>. YOU MAY REVIEW THE RECORDS MAINTAINED BY THE BUREAU THAT CONTAIN YOUR PERSONAL INFORMATION, AS PERMITTED BY THE INFORMATION PRACTICES ACT. FOR QUESTIONS REGARDING THIS NOTICE OR ACCESS TO YOUR RECORDS, YOU MAY CONTACT THE BUREAU AT (916) 227-3584.



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 – 038 (New 02/15)

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.

~~Please~~ 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	

PRIVACY NOTICE

THE INFORMATION PRACTICES ACT OF 1977 (CIVIL CODE SECTION 1798.17) AND THE FEDERAL PRIVACY ACT (PUBLIC LAW 93-579) REQUIRE THAT THIS NOTICE BE PROVIDED WHEN COLLECTING PERSONAL INFORMATION FROM INDIVIDUALS. INFORMATION REQUESTED ON THIS FORM IS REQUIRED BY THE STATE OF CALIFORNIA, CALIFORNIA GAMBLING CONTROL COMMISSION AND THE DEPARTMENT OF JUSTICE, DIVISION OF LAW ENFORCEMENT, BUREAU OF GAMBLING CONTROL (BUREAU), PURSUANT TO BUSINESS AND PROFESSIONS CODE SECTIONS 19865 AND 19866. PERSONAL INFORMATION SHOULD ONLY BE PROVIDED IN THE SPACES INDICATED. THE BUREAU IS RESPONSIBLE FOR MAINTENANCE OF THE COMPLETED FORM.

IN ADDITION, ANY PERSONAL INFORMATION COLLECTED BY STATE AGENCIES IS SUBJECT TO THE LIMITATIONS IN THE INFORMATION PRACTICES ACT AND STATE POLICY. THE INFORMATION YOU PROVIDE MAY ALSO BE DISCLOSED IN THE FOLLOWING CIRCUMSTANCES: 1) TO ANOTHER GOVERNMENT AGENCY AS REQUIRED BY STATE OR FEDERAL LAW; OR 2) IN RESPONSE TO A COURT OR ADMINISTRATIVE ORDER, A SUBPOENA, OR A SEARCH WARRANT. PURSUANT TO BUSINESS AND PROFESSIONS CODE SECTION 19821, SUBDIVISION (C), THIS FORM IS EXEMPT FROM THE CALIFORNIA PUBLIC RECORDS ACT.

THE DEPARTMENT OF JUSTICE'S GENERAL POLICY IS AVAILABLE AT: <http://oag.ca.gov/privacy-policy>. YOU MAY REVIEW THE RECORDS MAINTAINED BY THE BUREAU THAT CONTAIN YOUR PERSONAL INFORMATION, AS PERMITTED BY THE INFORMATION PRACTICES ACT. FOR QUESTIONS REGARDING THIS NOTICE OR ACCESS TO YOUR RECORDS, YOU MAY CONTACT THE BUREAU AT (916) 227-3584.



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

~~**Withdrawal of Self-Exclusion Removal Request**~~
~~**CGCC – 039 (New 02/15)**~~

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)

~~I voluntarily withdraw my previously submitted Self-Exclusion removal request.~~
 _____ (Initial here)

~~I understand that my exclusion period will continue, and that in order to be removed another removal request must be submitted, and that the full required one-year period must be served.~~
 _____ (Initial here)

~~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 removal request form is true, correct, and complete.~~

Signature	Date
Print Name	