

Request for Statewide Involuntary Exclusion of an Individual

CGCC-CH7-01 (New 05/20)

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BUREAU USE ONLY
BGC ID# _____



MAIL COMPLETED FORM TO:
 BUREAU OF GAMBLING CONTROL
 P.O. Box 168024
 Sacramento, CA 95816-8024
 (916) 830-1700

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY BEFORE YOU COMPLETE THIS FORM

All information must be typed or printed legibly in blue or black ink. If additional space is needed, please note response on a separate sheet of paper and attach to the form. **NOTE: THIS IS NOT A VOLUNTARY SELF-RESTRICTION OR SELF-EXCLUSION FORM. THIS FORM SHOULD NOT BE COMPLETED BY PATRONS.**

SECTION 1: IDENTIFYING INFORMATION OF PERSON TO BE EXCLUDED		
FULL NAME: LAST	FIRST	MIDDLE
ALIAS(ES), NICKNAME(S), OTHER FORMER LEGAL NAMES		
CURRENT RESIDENCE (STREET, CITY, STATE, ZIP CODE)		
MAILING ADDRESS IF DIFFERENT THAN CURRENT RESIDENCE (STREET, CITY, STATE, ZIP CODE)		
PRIMARY TELEPHONE NUMBER	BUSINESS NUMBER	EMAIL ADDRESS
GAMES MOST OFTEN PLAYED		

SECTION 2: PHOTO AND VISUAL DESCRIPTION OF PERSON TO BE EXCLUDED			
HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR
DRIVER'S LICENSE/IDENTIFICATION CARD NUMBER		STATE	EXPIRATION DATE (MM/DD/YYYY)
AFFIX A RECENT PASSPORT QUALITY PHOTOGRAPH HERE SHOWING HEAD AND SHOULDERS OF PERSON TO BE EXCLUDED	DATE OF BIRTH	RACE/ETHNICITY	GENDER
	DISTINGUISHING MARKS (SUCH AS VISIBLE SCARS OR TATTOOS – DESCRIBE MARK & LOCATION)		
MAKE AND MODEL OF VEHICLE NORMALLY DRIVEN		LICENSE PLATE	

SECTION 3: AFFIRMATION BY CARDROOM BUSINESS LICENSEE, KEY EMPLOYEE LICENSEE, OR GOVERNMENT EMPLOYEE

NOTE: This form is not for voluntary self-restriction or self-exclusions. This form is not to be completed by patrons.

THE FACT(S) AND REASON(S) WHY THE INDIVIDUAL SHOULD BE EXCLUDED ARE AS FOLLOWS:

SECTION 4: DECLARATION

The information provided above is true and accurate to the best of my knowledge and the individual described above should be excluded because he or she poses a threat to the public, gambling enterprise employees, or the gambling industry.

SIGNATURE

DATE (MM/DD/YYYY)

PRINTED NAME

TITLE

GAMBLING ESTABLISHMENT, FACILITY NAME, OR GOVERNMENTAL ENTITY