



SELF-EXCLUSION REMOVAL FORM

Full Name: _____

Last 4 Digits of SS#: XXX-XX-_____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Driver's License #: _____ License State: _____

Gender: _____ Race: _____ Eyes: _____

Hair: _____ Height: _____ Weight: _____

Any other names or aliases used: _____

Please select yes or no to the following questions and/or statements and initial where requested:

1. Is this request for removal from the West Virginia Lottery self-exclusion list of your own free will?

YES

NO

Initials _____

2. I do not feel I have a gambling problem and do not feel that being removed from this list will cause me harm.

YES

NO

Initials _____

3. I understand that the Self-Exclusion list is a tool used to protect me from problematic gambling behavior and I no longer feel I have to be restricted in those behaviors.

YES

NO

Initials _____

4. I understand that by completing this application, I am releasing myself from the protections and securities of the Self-Exclusion List.

YES **NO** **Initials** _____

5. I understand that by completing this application, I authorize the West Virginia Lottery to release the contents of this application to all West Virginia Casinos and their agents and affiliates.

YES **NO** **Initials** _____

6. I understand that by completing this application, I am hereby removed from the Self-Exclusion List, and any actions that occur after removal of this List are solely my responsibility and the West Virginia Lottery, its casinos, and their agents and affiliates are in no way responsible or accountable for actions or events that occur after I am removed from this list.

YES **NO** **Initials** _____

7. I understand that I am asking permission for reentry into any of the four (4) West Virginia Racetracks/Casinos and The Greenbrier Casino, all of which are regulated by the West Virginia Lottery, and can request to be placed back on this list at any time, following proper procedures.

YES **NO** **Initials** _____

PERSONAL ACKNOWLEDGEMENT

I, _____, acknowledge and understand that I am requesting voluntary removal from the West Virginia Lottery's Self-Exclusion List. I hereby request and authorize the Lottery Commission to approve my removal from this list and I am hereby removed from the list of excluded persons pursuant to the Racetrack Table Games Rule §179-8-126 through 130 and/or Limited Gaming Facility Rule §179-4-171 through 175.

I have reviewed and understand the following terms of this self-exclusion removal and agree to all of them, _____ as _____ signified _____ by _____ my _____ initials:

_____ This reinstatement is valid for ALL West Virginia Racetracks/Casinos, including The Greenbrier Casino, and it is my responsibility to police my gambling behavior at each.

_____ I understand I am ultimately held responsible for myself and limiting my access to West Virginia Casinos.

_____ I agree to the terms of this application, and accept reinstatement and its associated risks.

_____ I will not seek to hold the West Virginia Lottery or casino liable in any way should I enter a casino and/or use any of the services or privileges therein.

Please mail completed form to the following address:

**ATTN: David Bradley
West Virginia Lottery
900 Pennsylvania Avenue
Charleston, WV 25302**

I completely understand all provisions described herein and request to sign, voluntarily and knowingly, in agreement.

Patron Printed Name

Patron Signature

Date