

Application and Agreement for Placement on the Maryland Lottery and Gaming Control Commission's Voluntary Exclusion List

Instructions – Read carefully

- Read this entire Application and Agreement before answering the questions.
- Print the answers to all questions in blue or black ink.
- Present a valid driver's license or government-issued identification.
- Do you need a language interpreter or other assistance to fully understand this Application and Agreement?
 Yes No **Initial _____** *If yes, go to Section 5 - Interpreter and Other Assistance Information.*

Important Notices

By submitting this Application and Agreement for Placement on the Maryland Lottery and Gaming Control Commission's Voluntary Exclusion List ("Commission's Voluntary Exclusion List"), you are asking to be placed on the Commission's Voluntary Exclusion List within the State of Maryland. This means that you are voluntarily saying you do not want to participate in the gaming-related activities that you identify in Section 1, called *Select Your Exclusion*. If you are approved to be on the Commission's Voluntary Exclusion List, you will not be allowed to do those gaming-related activities in Maryland, and the places and people that offer these gaming-related activities are required to stop you from being on their premises or online site, and from doing any gaming. You could be arrested if you try to enter a place that offers the kind of gaming from which you want to be excluded.

After you complete this Application and Agreement, we will review it and let you know whether your application is approved so that you are placed on the Commission's Voluntary Exclusion List. If you are placed on the Commission's Voluntary Exclusion List, we will notify businesses that operate the gaming activity that you selected for exclusion that you are not allowed to be in their in-person or online site, and that you are not allowed to do any gaming with them, in-person or online. In other words: **If we approve your application and place you on the Commission's Voluntary Exclusion List, you will be prohibited from all gaming-related activities that you choose in Section 1 of this Application, such as casino gambling, playing the Lottery, playing Instant Bingo at facilities with more than 10 instant bingo machines, participation in fantasy competitions, and sports wagering.**

You are releasing the State from any liability that results from you submitting your application. This is described in Section 3, *Waiver and Release from Liability*.

Your exclusion will be effective, and will be enforced, for the period you select in Section 1 of this Application. *You will stay on the Commission's Voluntary Exclusion List for at least two years, regardless of any change in your personal circumstances. No exceptions.*

You will not be automatically removed from the Commission's Voluntary Exclusion List. To be removed, you must send a request in writing to the Commission's Responsible Gaming Coordinator at 1800 Washington Blvd., Suite 330, Baltimore, MD 21230 or email at responsible.gaming@maryland.gov showing that you meet all the requirements in Code of Maryland Regulations ("COMAR") 36.01.03.06. The Responsible Gaming Coordinator will review your request, and let you know if you can be removed from the List.

Initial here if you understand these Important Notices _____

If you do not understand any of these Important Notices, stop here. Ask any questions you have to the person who is helping you with this form. If you still do not understand these Important Notices, stop here, and request the assistance of the Responsible Gaming Coordinator at 410-230-8798 or responsible.gaming@maryland.gov.

Gender: Male Female Prefer Not to Answer Hair Color/Bald: _____ Eye Color: _____

Are you of Hispanic or Latino origin? Yes No

Racial Category – Select all applicable:

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Other _____

Complexion: Light Medium Dark

Other Distinguishing Physical Characteristics (birth marks, scars, tattoos, etc.): _____

Notices about my personal information:

Check each box.

- The Commission is collecting my personal information so that I can be voluntarily excluded from gaming activity.
- If I do not provide all the information required on this form, my application will be rejected.
- I may inspect, amend, or correct the personal information the Commission collects about me.
- The Commission will maintain my personal information as sociological information under State law, and it is not generally available to the public.
- The Commission will share my personal information only as authorized by: (1) law; (2) regulation; or (3) me.

Section 3: Waiver and Release from Liability

My completing and submitting this Application and Agreement, or anything that happens because I complete and submit this document, does not create any cause of action, right of action, claim, or other right whatsoever in favor of any person against the State of Maryland, the Maryland Lottery and Gaming Control Agency, the Maryland Lottery and Gaming Control Commission, or their employees, agents, and representatives. I expressly and forever release, hold harmless, and discharge the State of Maryland, the Maryland State Lottery and Gaming Control Agency, the Maryland Lottery and Gaming Control Commission, and their employees, members, agents and representatives, from any liability to me and my heirs, administrators, executors, and assignees for any harm, monetary or otherwise, that may arise out of, or by reason of any act or omission relating to, this Application and Agreement for placement on the Commission’s Voluntary Exclusion List and any request for removal from the Commission’s Voluntary Exclusion List, including: (1) processing or enforcing an application or a removal request; (2) for any gaming business with which I have an account – or their affiliates in another jurisdiction - withholding account benefits, points, or privileges from me, or failing to restore accounts, account benefits, points, or privileges to me; (3) allowing me to engage, or preventing me from engaging, in gaming activity while I am on the Commission’s Voluntary Exclusion List; and (4) disclosure of information about me to any individual, group, or entity as authorized by law, regulation, or me, except for an unlawful disclosure of such information. I accept the risk of potential or actual adverse public notice, embarrassment, criticism or other action, including any financial loss, which may directly or indirectly result from my completion and submission of this Application and Agreement.

Signature of Applicant for Voluntary Exclusion

Date

Section 4.1: Acknowledgments – Applies to All Requests for Voluntary Exclusion

Initial each statement to show that you understand it and that it is true.

_____ I am not presently impaired by, or under the influence of, any alcoholic beverage, drug (prescription or not), or other substance, or suffering from any mental health condition, that impairs my ability to make a sober and informed decision.

If you disagree with this statement, stop.

_____ I have a gambling problem and am unable to gamble responsibly.

_____ I can find help with my problem gambling at <https://www.mdlottery.com/about-us/responsible-play/>.

_____ By completing this Application and Agreement to be placed on the Commission's Voluntary Exclusion List, I am saying that I want to be excluded or prevented from participating in each gaming activity I selected in Section 1, for at least 2 years.

_____ The information that I have provided in this Application and Agreement is accurate and true.

If the Commission accepts my application and puts me on the Commission's Voluntary Exclusion List, I understand and state that:

_____ The Commission will give my identifying information to the gaming businesses that operate gaming activities I want to be excluded from. Those gaming businesses can and will exclude me from all gaming activity, including withholding or diverting my winnings if I won while I am on the Commission's Voluntary Exclusion List.

_____ All gaming businesses that operate the gaming activities I asked to be excluded from are required to stop me from entering and gaming in their in-person premises, gaming on their online platform, and collecting or diverting any winnings I won while I was on the Commission's Voluntary Exclusion List.

_____ If I asked to be excluded from an in-person gaming activity, and I go to a place to gamble in-person, I must be ejected from the premises and may be subject to arrest for criminal trespass and maybe other criminal charges related to my presence on a property.

_____ My exclusion from gaming activity may result in my forfeiture of unredeemed items, accumulated rewards points and other benefits. "Unredeemed item" generally means a noncash item that has monetary value, like a token, voucher, ticket, chip, coupon, or similar item. By submitting this Application, I contractually agree that, if I participate in a gaming activity that I chose to be excluded from in Section 1, I will redeem or liquidate all unredeemed items that have monetary value that I have in my possession since being placed on the Commission's Voluntary Exclusion List and designate that their proceeds be contributed to the Problem Gambling Fund. In other words, I am not allowed to collect any prize or keep any unredeemed items while I am on the Commission's Voluntary Exclusion List, and am agreeing to give them up.

_____ My exclusion from gaming activity means that a gaming business from which I am excluded can suspend or cancel my gaming accounts, including player rewards accounts, so I could lose my accumulated rewards points or other benefits.

_____ My exclusion from gaming activity in Maryland could affect my ability to gamble in other jurisdictions. If I am excluded from a gaming business in Maryland, and that business has affiliated gaming businesses in another jurisdiction, an out-of-state gaming business could exclude me from gaming activities and platforms just because I am excluded in Maryland. In other words, I could be banned from gambling by gaming businesses in other jurisdictions if they are related to a Maryland gaming business or brand.

_____ I am applying for the Commission's Voluntary Exclusion List of my own free will.

_____ If I am placed on the Commission's Voluntary Exclusion List, Maryland gaming businesses associated with the gaming activity that I selected in Section 1 will receive information about me from this Application and Agreement, so they can remove or prevent me from gaming at or through their properties or platforms until I am removed from the Commission's Voluntary Exclusion List.

_____ I cannot shorten the time that I am on the Commission's Voluntary Exclusion List, even if my personal circumstances change. I will be on the List for at least two years, and maybe for life.

_____ I will never be automatically removed from the Commission's Voluntary Exclusion List. If I want to be removed after 2 years, I must make a written request for removal, and the Commission must decide whether to grant it. Commission regulations in COMAR 36.01.03 explain the process.

_____ My placement on the Commission's Voluntary Exclusion List means that I will not receive direct marketing and promotion materials about gaming activities.

_____ My placement on the Commission's Voluntary Exclusion List does not release me from any debts I incurred before, or may incur during, my exclusion period.

_____ The Commission will use the information that I provide in this Application and Agreement to decide whether I am eligible to be on the Commission's Voluntary Exclusion List, and to put me on the list if I am eligible.

_____ If I refuse to, or cannot, provide information required on this Application, the Commission may reject my application.

Section 4.2: Acknowledgments – Applies to Casinos Only

If have requested to be excluded from Maryland casinos, initial each statement if you understand it and it is true.

If the Commission accepts my application and puts me on the Commission’s Voluntary Exclusion List for Maryland casinos, I understand that:

_____ I will be prohibited from entering a Maryland casino, and playing table games or video lottery terminals (slot machines).

_____ If I enter a casino, casino staff will remove me from the casino, and prevent me from collecting any winnings. If the casino allows sports wagering, I will not be allowed to use, or collect winnings on, the casino’s in-person, online or mobile sports wagering platform.

_____ It will be my responsibility to stop going to, and gambling in, all Maryland casinos.

_____ If I enter a casino that offers sports wagering, casino staff will remove me from the casino, and prevent me from collecting any winnings. I will not be allowed to use, or collect winnings on, the casino’s in-person, online, mobile or in-person sports wagering, associated fantasy competition operator’s platform, or any other gaming platform.

_____ If a Maryland casino has affiliated casinos in other jurisdictions, I may be banned from them, and from using any player rewards benefits at those casinos.

Section 4.3: Acknowledgments – Applies to Lottery Only

If you requested to be excluded from Lottery play, initial each statement if you understand it and it is true.

If the Commission accepts my application and puts me on the Commission’s Voluntary Exclusion List for Lottery, I understand that:

_____ I will be prohibited from playing any Lottery game, or participating in any Lottery promotion, including My Lottery Rewards.

It will be my sole responsibility to stop:

_____ a) Purchasing (in-person or by subscription) or playing any ticket offered by the Maryland Lottery, which means scratch-offs, Pick 3, 4, or 5, and draw games like Keno, Racetrax, Mega Millions, Powerball, and Cash4Life; and

_____ b) Participating in the Maryland Lottery My Lottery Rewards Program, or any other Maryland Lottery promotion or game.

_____ For My Lottery Rewards, any entry submitted with my name and any points related to my name are invalid and void, and: will not be considered in relation to any aspect of MLR; no reward or prize will be awarded; no subscription will be paid; and my MLR account may be closed.

Section 4.4: Acknowledgments – Applies to a Bingo Facility with more than 10 Instant Bingo Machines Only

If you requested to be excluded from bingo facilities with more than 10 instant bingo machines, initial each statement if you understand it and it is true.

If the Commission accepts my application and puts me on the Commission’s Voluntary Exclusion List for instant bingo, I understand that:

_____ I will be prohibited from playing an instant bingo machine at an instant bingo facility with more than 10 instant bingo machines.

It will be my sole responsibility to stop:

_____ a) Entering the premises of an instant bingo facility that has more than 10 instant bingo machines; and

_____ b) Playing an instant bingo game at an instant bingo facility with more than 10 instant bingo machines.

Section 4.5: Acknowledgments – Applies to Fantasy Competitions Only

If you requested to be excluded from fantasy competitions, initial each statement if you understand it and it is true.

If the Commission accepts my application and puts me on the Commission’s Voluntary Exclusion List for fantasy competitions, I understand that:

_____ I will be prohibited from participating in a fantasy competition offered by a Commission-registered fantasy competition, and will likely be banned from participating in a fantasy competition offered by that operator or affiliate in another jurisdiction.

_____ It will be my sole responsibility to stop participating in fantasy competitions offered by Commission-registered fantasy competition operators.

_____ Fantasy competition operators may ban me from their other offerings (e.g. sports wagering).

_____ If I enter a casino with an associated sports wagering operator that offers fantasy competitions, casino staff will remove me from the casino, and prevent me from collecting any winnings. I will not be allowed to use, or collect winnings on, the casino's in-person, online, mobile or in-person sports wagering, associated fantasy competition operator's platform, or any other gaming platform.

Section 4.6: Acknowledgments – Applies to Sports Wagering Only

If you have requested to be excluded from Sports Wagering, initial each statement if you understand it and it is true.

If the Commission accepts my application and puts me on the Commission's Voluntary Exclusion List for sports wagering, I understand that:

_____ I will be prohibited from participating in sports wagering in Maryland, in-person, online, or on a mobile device.

_____ I will be prohibited from entering the sports wagering-related area of any business where sports wagering is conducted, including, OTBs, and other premises.

_____ I will be prohibited from entering a Maryland casino that offers sports wagering.

_____ If a Maryland sports wagering business has affiliated sports wagering businesses in other jurisdictions, I may be banned from engaging in sports wagering with those businesses in-person and online, and from using any player rewards benefits I may have accrued in Maryland.

_____ Maryland sports wagering businesses may remove or prevent me from using their affiliated sports wagering platforms, or suspend my accounts, in another jurisdiction.

_____ It will be my sole responsibility to stop participating in sports wagering offered by a Maryland sports wagering licensee, in-person (at casinos, OTBs, anywhere else), online, or on any mobile device.

_____ If I enter a casino that offers sports wagering, casino staff will remove me from the casino, and prevent me from collecting any winnings. I will not be allowed to use, or collect winnings on, the casino's in-person, online, mobile or in-person sports wagering or any other gaming platform.

_____ Sports-wagering operators may ban me from their associated offerings, such as fantasy sports competitions.

Section 4.7: Acknowledgment – Employment Consideration

Initial _____ My employment and job duties require me to enter or work in a Maryland casino, an instant bingo operation with more than 10 instant bingo machines, or a place where sports wagering is offered or conducted. Yes No

If yes:

Employer _____

Job Title _____ Maryland Gaming License Number (if applicable): _____

Name(s) of casino, bingo hall, or sports wagering facility _____

Section 5: Interpreter and Other Assistance Information

Only a State-approved Interpreter can be used for an applicant requiring Interpreter services.

Date used: _____

Language Identified for Applicant: _____

Language Solution's MLGCA ID#: _____

If other assistance was required, please explain: _____

Describe services used for other assistance: _____

Section 6: Maryland Residents Only

Maryland Center for Excellence on Problem Gambling– Consent for Contact

MCEPG promotes healthy and informed choices regarding gambling and problem gambling. Do we have permission to give the MCEPG your name and contact information so they may contact you to give you information about responsible gambling help that is free and confidential?

Yes No

If yes, how would you like to be reached: _____

Section 7: Certifications and Execution of Agreement

A. Applicant Certification

READ CAREFULLY BEFORE SIGNING.

My signature below certifies that:

1. I have no unanswered questions about the Commission’s Voluntary Exclusion List that I believe prevent me from making an informed decision about whether to complete and submit this Application and Agreement.
2. I HAVE COMPLETELY READ THIS APPLICATION AND AGREEMENT, I FULLY AND CLEARLY UNDERSTAND IT, AND I AM VOLUNTARILY AND KNOWINGLY SIGNING THIS APPLICATION AND AGREEMENT. I AGREE TO BE BOUND BY ITS TERMS.

 Signature of Applicant for the Commission’s Voluntary Exclusion List

 Date

 Printed Name of Applicant

B. INTERNAL: MLGCA Staff Certification

I witnessed _____ sign his/her name to this Application and Agreement, and I certify that:

This individual does not appear to be under the influence of any alcoholic beverage or drug, and appears to be knowingly and voluntarily applying for the Commission’s Voluntary Exclusion List. The signature, physical description and identity of the individual match the individual’s photograph and credentials, photocopies of which are attached to this Application and Agreement. The Application and Agreement is completed. I informed the individual that he/she will be notified, in writing, about whether the Application is approved, and that, if approved, the individual will be placed on the Commission’s Voluntary Exclusion List.

 Signature of MLGCA Staff

 Printed name

 Date

 Location

For Internal Use Only	
Date Received: _____	Date Processed: _____
By: _____	
Accepted: _____	Denied: _____