



# Choctaw Nation Gaming Commission

3715 Choctaw Rd. / P.O. Box 5229 Durant, OK 74701-5229  
Phone: (580) 924-8112 Fax: (580) 920-4966

## Self-Exclusion Form

**Please Print Clearly:**

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Alias/Nicknames: \_\_\_\_\_ Race: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

**Personal Description:**

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Sex: \_\_\_\_\_ Scar/Tattoos: \_\_\_\_\_

**\*\*Please submit a copy of your Government issued photo I.D.**

I, \_\_\_\_\_, acknowledge that I am a problem gambler. I am voluntarily requesting exclusion from the entire premises of **all** Choctaw Casinos, including, but not limited to, Gaming Premises, Restaurants, Hotels, The District and Concert Venues. I understand that my information should be removed from all mailing lists and my Rewards Club Card will be cancelled. I understand that no further points, rewards or benefits may be accumulated or redeemed from the player recognition programs that I have participated in. I hereby request and authorize the Choctaw Nation Gaming Commission (CNGC) to place my name on the list of self-excluded Guests for a period of:

One Year \_\_\_\_\_, Five Years \_\_\_\_\_, Ten Years \_\_\_\_\_, (Please Check One.)

I have reviewed and understand the following terms and restrictions of this Self-Exclusion Form and agree to all of them:

- If I have completed a self exclusion form with the Oklahoma Association for Problem Compulsive Gambling (OAPCG) it will also be considered effective at all Choctaw Casinos.
- I will not attempt to enter and/or use any of the services or privileges of any Choctaw Casino for the length of time indicated above.
- I acknowledge and understand that if I am identified while attempting to enter a Choctaw Casino or use the services of the facility, I shall be promptly escorted from the premises. My continued non-cooperation or attempt to breach my Self-Exclusion Form may result in being placed on the involuntary (Casino Trespass) exclusion list.
- I knowingly and willfully acknowledge that by completing this Self-Exclusion Form that it is solely my own responsibility to refrain from entering any Choctaw Casino.
- **This Self-Exclusion Form request is irrevocable during the length of time indicated above. Once this paperwork is completed and submitted, the Self-Exclusion Form will be in effect for the entire time requested. The length or effectiveness of the Self-Exclusion Form is not negotiable and absolutely no exceptions will be made.**
- The CNGC will treat this Self-Exclusion Form request confidentially.



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## Self-Exclusion Form (Continued)

- I understand that the Choctaw Casino personnel cannot pay a casino jackpot/ticket/chips/promotional prize to a Guest who is on the CNGC or the OAPCG self-exclusion list. Any funds won by a Guest on either self-exclusion list shall be donated by Choctaw Casino to a federally recognized non-profit organization
- I understand that neither the Choctaw Nation of Oklahoma, Choctaw Casinos, CNGC, nor any associate thereof shall be liable to any self-excluded Guest or to any other party in any proceeding and neither the tribe, casino personnel, nor the CNGC shall be deemed to have waived its sovereign immunity with respect to any Guest for any harm, monetary or otherwise, which may arise as a result of:
  1. The failure of casino personnel or CNGC to withhold or restore gaming privileges from or to a self-excluded Guest; or
  2. Otherwise permitting a Self-Excluded Guest to engage in gaming activity in a casino while on the list of self-excluded Guests.
- I understand that it may take up to 60 days from the time I request to be self-excluded before my name will cycle out of any mailings that I currently receive from Choctaw Casinos.
- I understand that I am not permitted to utilize any offers that I may receive from any Choctaw Casino after the executed date submitted on the Self-Exclusion Form.
- I will not seek to hold the Choctaw Nation of Oklahoma or CNGC liable in any way should I enter a Choctaw Casino and/or use any of the services or privileges therein despite this self-exclusion request, and I agree to indemnify the Choctaw Nation of Oklahoma for any liability relating to this request.

Executed at (City) \_\_\_\_\_, (State) \_\_\_\_\_, on this \_\_\_\_\_ day of  
(Month) \_\_\_\_\_, (Year) \_\_\_\_\_.

Guest Signature: \_\_\_\_\_

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**For Notary Use only**

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

Notary Public in the State of \_\_\_\_\_ for the County of: \_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

Notary Public Signature \_\_\_\_\_

(Seal)

Mail or deliver completed form with picture attached to:  
**Choctaw Nation Gaming Commission**  
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