

Voluntary Self-Exclusion Form

THIS FORM IS TO BE COMPLETED BY THE PERSON WHO REQUESTS TO BE EXCLUDED FROM ALL GAMING ACTIVITIES OFFERED BY OFFTRACKBETTING.COM.

By submitting this completed voluntary self-exclusion form you agree to be excluded from access to the account holder area and betting interface at OffTrackBetting.com, you will be prohibited from internet and account wagering, and from participating in any additional gaming activities not currently listed here which may, in the future, be offered at OffTrackBetting.com.

Full Name (print)	int)		
Email address:			
	Last 4 of SSN:		
, State:	Zip:		
	Email address:		

MINIMUM SELF-EXCLUSION PERIOD

Exclusion will be enforced for the period selected below, with NO EXCEPTIONS. You will remain on the self-exclusion list until you complete the entire exclusion period, regardless of any change in personal circumstances.

Select the period of time you are requesting to be excluded from internet and account wagering, and from participating in any additional gaming activities not currently listed here which may, in the future, be offered at OffTrackBetting.com.

_____ One (1) year

_____ Three (3) years _____ Five (5) years

_____ Lifetime



WAIVER AND RELEASE

I understand that by submitting this request, it shall not create any cause of action, right of action, claim, or other right whatsoever in favor of any person against Lien Games Racing LLC, OffTrackBetting.com, or any of the representatives or employees of any of the foregoing entities. I hereby release and forever discharge Lien Games Racing LLC, OffTrackBetting.com, and the representatives and employees of such entities and properties, 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 request for voluntary self-exclusion or any subsequent request for removal from the self-exclusion list, including (1) processing or enforcement of this request or any subsequent request, (2) the failure of OffTrackBetting.com to withhold gaming privileges from me or to restore gaming privileges to me, (3) permitting or not permitting me to engage in gaming activity while I am on the list of self-excluded persons and (4) disclosure of information about me to any person who or group that is not affiliated with OffTrackBetting.com, except for a willfully unlawful disclosure of such information.

ACKNOWLEDGEMENT (Initial each statement below before signing)

_____I certify that the information that I have provided above and in connection with this request is true and accurate.

_____I am not presently under the influence of drugs, alcohol, or suffering from a mental health condition that impairs my ability to make an informed decision.

_____I acknowledge that I am voluntarily seeking to exclude myself from all gambling activity at OffTrackBetting.com, including those opened or acquired after the date of this request, for the whole term specified on page 1.

_____I have read, understood, and agree to the Waiver and Release included with this request.

_____I understand that under no circumstances may I shorten the duration of my self-exclusion term.

_____I am aware that my signature authorizes OffTrackBetting.com to restrict my pari-mutuel wagering activities, and any gaming activities that may, in the future, be offered at OffTrackBetting.com for the duration of the exclusion period I selected on page 1 and until my name has been removed from the self-exclusion list.

_____I am aware and agree that during my period of self-exclusion, if I engage in gaming activity at or with OffTrackBetting.com, I may not collect any winnings or recover any losses resulting from the gaming activity.

_____I understand further that any money or thing of value obtained by me from or owed to me by OffTrackBetting.com as a result of wagers made by me while on the self-exclusion list will be forfeited.

_____I agree that I will not attempt to access the website of and/or use any of the services or privileges available through OffTrackBetting.com during the period I selected on page 1.

_____I understand and agree that this exclusion will prevent the receipt of direct marketing and promotion materials regarding gaming opportunities.



_____I acknowledge and understand that this self-exclusion request does not release me from any debts I incurred prior to or during my self-exclusion period.

____I fully and completely understand all provisions of this agreement & request & sign it voluntarily, freely & knowingly.

THIS VOLUNTARY SELF-EXCLUSION REQUEST MUST BE NOTARIZED. You must send a picture of your Driver's License or Government-issued photo I.D. with this form.

Account Holder Signatu	re	Date	
STATE OF			
COUNTY OF			
On this day of	of, 20	0, before me personally came	
		, personally known to me (or proved to r	ne on the basis
of satisfactory evidence) to be the person whose name is	s subscribed to the foregoing written instrument a	nd
acknowledged that he c	or she freely executed it.		
Witness my hand and o	fficial seal		
Signature of Notary Pu	ıblic	Printed Name of Notary Public	
F	•	s photo ID by scanning/emailing to ffTrackBetting.com	
	Forms received after 4pm E	astern will be processed the next day	
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