



Mashantucket Pequot Tribal Nation Gaming Commission

Patron Voluntary Exclusion Application

The Mashantucket Pequot Tribal Nation (MPTN) offers you the opportunity to voluntarily exclude yourself from Foxwoods. The Mashantucket Pequot Tribal Nation, by and through the Mashantucket Pequot Gaming Enterprise (d/b/a Foxwoods Resort Casino), a wholly owned, unincorporated, instrumentality of the Mashantucket Pequot Tribal Nation, and the Mashantucket Pequot Tribal Nation Gaming Commission (MPTNGC) will make reasonable efforts to deny you access, but will accept no responsibility in the event that you fail to fully comply with this self-initiated exclusion

Please read the following thoroughly

- I understand that my failure to comply with this voluntary exclusion shall be considered trespass.
- I understand that upon this voluntary exclusion, the points that I have in my player account will be frozen.
- I understand that the **“Five-year Voluntary exclusion”** option will be automatically rescinded upon reaching five years from the exclusion date. This is a one-time option. Future requests will be restricted to the Permanent option.
- I understand that the **“Permanent Voluntary exclusion”** is a lifetime option, you cannot under any circumstances be removed from the exclusion list.
- I understand that if I should return in violation of this agreement, I am not eligible to receive any winnings or recover any losses.

Exclusion means you may not be employed by the MPGE (Foxwoods) in any capacity and may not be in the Foxwoods Resort Casino for any reason.

I hereby request that I be refused entrance to, as well as, being excluded from the gaming facility at Foxwoods Resort Casino for a period of:

- Five Years** **Permanent**

MPTNGC Exclusion Statement: *Under the authority vested in the MPTN Gaming Commission by the Final Mashantucket Pequot Gaming Procedures, this document serves as notice that you are hereby excluded from Foxwoods Resort Casino and/or gaming authorized by the MPTNGC to regulate .*

Patron’s Acknowledgement to the Contents on this Form: I understand and acknowledge all contents of this Patron Voluntary Exclusion and I acknowledge that I am not under duress or under the influence of any substance (e.g. alcohol, drugs or medication, or have any condition that might impair my ability to understand the statements given above.

Requestor's Signature _____ Date: ____/____/____

MPTNGC Representative _____ Date: ____/____/____

(or)

Notary _____ Date: ____/____/____



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Patron Voluntary Exclusion Application Player Information

This form may be completed at the Gaming Commission Office in Great Cedar Casino or mailed to the **MPTN Gaming Commission Chair, 350 Trolley Line Boulevard, P.O. Box 3250 Mashantucket, CT 06338-3250**. If mailed to us, this form must be notarize and include one (1) passport size photograph or clear copy of driver's license for identification purposes.

PLEASE PRINT:

Name: First: _____ Middle Initial: _____ Last: _____

Street (Home) Address: _____

City/Town: _____

Province/State: _____

Country: _____ Zip Code: _____

Mailing Address (If home address is different)

Date of Birth (MM/DD/YY): ____/____/____ Social Security Number: ____/____/____

Player Card Number (if any): _____

Reason for voluntary exclusion: _____

Place Photo Here

If you have a gambling problem, we strongly advise you to contact:

**Connecticut Council on Problem Gambling at
1- 888-789-7777.**

**Rhode Island Gambling Treatment Program at
1-401-444-7036**