



PHILIPPINE AMUSEMENT & GAMING CORPORATION
A Sure Bet for Progress in Gaming, Entertainment and Nation Building

Self Exclusion Application Form

USE BLOCK LETTERS

Personal Information			
Name (Family Name)		(First Name)	
ID Presented	<input type="checkbox"/> Passport	<input type="checkbox"/> Driver's License	<input type="checkbox"/> SSS <input type="checkbox"/> Others _____
Date of Birth (mm/dd/yyyy)	Gender	ID No.	
	<input type="checkbox"/> Male <input type="checkbox"/> Female	Nationality	
Contact Information			
Block / House No.	Floor / Unit No., Building	Street	
Village/Subdivision		City	
Contact Numbers (landline and mobile)		Email	
Gaming establishment visited regularly:	<input type="checkbox"/> e-Games outlet	<input type="checkbox"/> e-Bingo boutique	<input type="checkbox"/> Bingo hall <input type="checkbox"/> Sports-betting kiosk
	<input type="checkbox"/> Poker club	<input type="checkbox"/> Casino, pls. specify _____	
Are you willing to receive articles/reading materials about Responsible Gaming? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Recent 2x2 Photo

Attachments:

1. Photocopy of government-issued photo ID
2. One (1) recent 2x2 photo

TERMS AND CONDITIONS

I understand the content and purpose of this Exclusion application and that the effect of this application is that an Exclusion Order will be enforced which shall exclude myself from entering any gaming establishment operated and regulated by PAGCOR. I understand that this Exclusion Order is irrevocable.

I understand that my application for Self Exclusion will stay in force for a period of:

- Six (6) months
 One (1) year
 Five (5) years

I understand that PAGCOR will provide my name and particulars to all gaming establishments operated and regulated by PAGCOR for the purpose of banning from playing.

I declare that the information provided in this application are true and correct.

I declare that I will hold PAGCOR harmless from any claim for damages that may be brought against PAGCOR in any proceeding in relation to this Exclusion Order.

(Signature over Printed Name)

(Date)