



SELF-LIMIT FORM

CG Technology ("CG" or the "Company") supports responsible gaming and is committed to providing information on available problem gambling resources to the Company's patrons who believe they may have a gambling problem. In compliance with Nevada Gaming Regulation 5.170, CG maintains a self-limit program that allows our patrons to voluntarily self-limit themselves from certain activities and privileges. If you would like to self-limit, please neatly print all of the information requested below and submit your completed form to any CG race and sports book (notarization not required) where you must provide a valid, government-issued form of photo identification for purposes of identity verification. You may also mail this form (notarization required) to: CG Technology, ATTN: Compliance Department, 2675 South Highland Drive, Las Vegas NV 89109. If you choose to mail this form, it must be notarized for purposes of identity verification.

- 1. I hereby request to self-limit my access to gaming privileges, including receiving complimentaries, and agree to be removed from all direct mail marketing lists, telemarketing and electronic marketing lists, promotional mail lists and player recognition programs at all CG race and sports books in Nevada.
2. I understand that CG will honor my request to self-limit as described above unless and until I submit a request to rescind this voluntary self-limitation. Any rescission request must be in writing and notarized. I understand that I may request a Rescission Request Form by contacting CG Technology at the address above or at 702-677-3867.
3. I understand that if I receive from CG any financial gaming privilege, material or promotion after the effective date of self-limitation, I must contact the Company's Compliance Department at (702) 677-3867 or at the above address within ten (10) days of receiving the privilege, material, or promotion. I acknowledge that for my request of self-limitation to be truly effective, I must exercise self-restraint and should not ask any CG employee to provide me with any of the privileges that are the subject of this request.

This request cannot be processed without the completion of the information below.

Full Name:
Alias or Nickname:
Date of Birth:
Mailing Address:
Email Address(es):
Telephone Number(s):
Social Security Number:

Patron's Signature: Date:

State of Nevada
County of

This instrument was acknowledge before me on [date] by [name of person] who personally appeared before me and whose identity I verified.

Notary Public
Printed Name:
(Seal)
My Commission Expires:

If this form is not submitted in person, it must be notarized. If you or anyone you know may have a gambling problem, please call the Problem Gamblers Helpline at 1-800-522-4700.

FOR OFFICE USE ONLY

Date Received: Received By: Race and Sports Book Management Signature:
Date patron's government issued identification scanned & attached to this form: Date copy was sent to Compliance Dept.:
CG Compliance Dept. Signature:

A copy should be sent to the Compliance Department for distribution to other CG race and sports books, and except where the patron mailed this form to the Company's address, above, the original should be maintained in the race and sports book at which the patron submitted this form. It is the responsibility of the race and sports book and the home office to properly update their computerized and/or manual records so that the patron does not receive any of the privileges, materials or promotions described above.