

## Exclusion Order

TO: \_\_\_\_\_ (name of problem gambler)

OF: \_\_\_\_\_ (address, town or city)

DOB: \_\_\_\_\_ ID: \_\_\_\_\_

TAKE NOTICE that pursuant to the Gambling Act 2003 **YOU** are **PROHIBITED** from entering \_\_\_\_\_ (insert name of venue) for a period of \_\_\_\_\_ months/years (insert exclusion period up to a maximum of 2 years) from the date of this notice because (tick the option that applies):

a) you have identified yourself as a problem gambler and requested that you be excluded from the above-named venue;

**OR,**

b) there are reasonable grounds to believe you are a problem gambler.

SIGNED: \_\_\_\_\_ (Venue manager or person acting on the venue manager's behalf)

DATE: \_\_\_\_\_

**IF YOU** breach this exclusion order by **RE-ENTERING THE ABOVE-NAMED VENUE** within the specified time period **YOU COMMIT AN OFFENCE** under section 312 of the Gambling Act 2003 and will be liable for a fine of up to \$500.00. The venue manager or person acting on the venue manager's behalf will be required by law to **REMOVE YOU** from the premises and the Police may be requested to assist in your removal.

**FOR SELF EXCLUSION:** I have/have not (delete one) provided a photograph of myself.

SIGNED: \_\_\_\_\_ (gambler) DATE: \_\_\_\_\_

Copies of the personal information provided on this form will be held at the above-named venue and at NZCT Head Office as part of our harm minimisation policy. Any enquiries regarding this information should be directed to:

NZCT, PO Box 10-857, Wellington.

**Original to be retained by the venue**

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