

SELF-BAN FORM

Please print clearly:

Full Name:				S.S.#				
Street Address:				Date of Birth:		Insert Photo Here		
City:		State:		Zip Code:		Insert Friedo Here		
Home Phone #:		Business Phone #:						
Please list any additional names used:					Driver's License # / State:			
Height (feet/inches):	Weight (pounds):		Hair Color:		Eye Color:		Gender:	
Scars/Tattoos: NA Etl						Ethnicity:		
Other Distinguishing Physical Characteristics:								
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casinos or gaming facilities (collectively, the "Gaming Facilities") owned, operated, or managed by Osage Tribe Gaming Enterprise, d/b/a Osage Casino. I acknowledge that this self-exclusion will include Gaming Facilities that are opened or acquired by Osage Casino after the date of this request. The term "Gaming Facilities" as used herein shall include any part of any casino or property, including but not limited to gaming areas, gaming floors, restaurants, and pavilions, under the control or management of Osage Casino.

I have carefully reviewed and understand the terms and conditions set forth in this Self-Exclusion Form, and I hereby covenant, agree and consent as follows:

- 1. I acknowledge that this self-exclusion constitutes an **irrevocable** One Year ban effective five (5) days proceeding the date of this request, from all Gaming Facilities owned, operated or managed by Osage Casino.
- 2. I will not attempt to enter and/or use any of the services or privileges of any Gaming Facility owned, operated or managed by Osage Casino.
- 3. I acknowledge that should I attempt to enter into a Gaming Facility or use the services of any such facility and am detected, I will be promptly removed from the premises and hereby consent to such removal. I further acknowledge that I may be arrested and prosecuted for trespassing and other criminal violations under the law.

- 4. I consent and agree to have my photograph taken by security personnel to be used solely for identification purposes in connection with the enforcement of this self-exclusion.
- 5. AS OF THE DATE HEREOF, I ACKNOWLEDGE AND AGREE THAT I AM NOT ENTITLED TO RECOVER ANY LOSSES NOR ELIGIBLE TO COLLECT ANY JACKPOTS, COUPONS, PROMOTIONS, DRAWINGS, TICKET REDEMPTIONS, COMPS, OR OTHER PRIZES IN ANY FORM. I CONSENT TO FOREGO ANY AND ALL WINNINGS THAT I MAY HAVE AT THE GAMING FACILITIES, WITHOUT RECOVERY OF ANY LOSSES OR AMOUNTS THAT MAY HAVE BEEN SPENT AT THE GAMING FACILITIES.
- 6. I waive any right to any complementaries or other benefits that I may have earned in any player reward program, and that those complementaries and benefits shall be void and uncollectible.
- 7. I request and authorize Osage Casino, its employees, agents, and representatives to confiscate any and all jackpots, coupons, promotions, drawings, ticket redemptions, complementaries or other prizes in any form given to me in error or as a result of deception on my part.
- 8. I acknowledge that OSAGE CASINO, its employees, affiliates, agents, and representatives shall take reasonable steps to remove my name from any mailing lists, promotional offers, and other means of marketing, but I will notify the marketing department of OSAGE CASINO by phone at [insert phone number] if I receive any marketing or promotional materials. I further acknowledge that any marketing or promotional materials sent in error to me by mail or otherwise shall neither create nor be construed to create any right, claim or cause of action for damages against OSAGE CASINO, its employees, affiliates, agents or representatives.
- 9. I acknowledge that by accepting this self-exclusion request and taking reasonable steps to abide by this request, OSAGE CASINO, its employees, affiliates, agents and representatives are not creating a duty nor are they obligated in any way to prevent my access to any Gaming Facility. The ultimate responsibility to limit my access to any Gaming Facility remains mine alone.
- 10. I hereby release and forever discharge OSAGE CASINO, its employees, affiliates, agents and representatives from any liability to me and my heirs, administrators, executors, successors and assigns from any harm, monetary or otherwise, which may arise out of, or by reason of, any act or omission relating to this request for self-exclusion and the matters contemplated herein.
- 11. I agree to indemnify and hold harmless OSAGE CASINO, its employees, affiliates, agents and representatives to the fullest extent permitted by law for any and all liabilities, judgments, damages, and expenses of any kind, including attorneys' fees, resulting from or in connection with the performance or non-performance of this self-exclusion request and the matters contemplated herein.
- 12. I certify that the information that I have provided above is true and correct in all respects.

IMPORTANT NOTIFICATION

The person named within this self-exclusion must request in person and in writing to self-lift the exclusion within five (5) days from the date the self-exclusion was signed. Failure to act within the five (5) day time period shall result in an **irrevocable** One Year ban term.

By signing below, I voluntarily, know and conditions set forth herein.	vingly and intentionally agree to be legally bound by the terms
Signature:	Date:

DO NOT WRITE BELOW – F	FOR AUTHORIZED PERSONNEL USE ONLY
Full Name:	
Type of I.D. Offered:	(*Must make a photocopy*)
to agree with that contained on the above	requesting self-exclusion of gaming privileges appear we identification credentials, and any physical in appears to agree with his or her actual appearance.
Signature of Authorized Personnel	Date
Signature of Supervisor	Date