

## Application and Agreement for Placement on the Maryland Lottery and Gaming Control Commission's Voluntary Exclusion List

### Instructions – Read carefully

- Read this entire Application and Agreement before answering the questions.
- Print the answers to all questions in blue or black ink.
- Present a valid driver's license or government-issued identification.
- Do you need a language interpreter or other assistance to fully understand this Application and Agreement? If yes, go to Section 4 - Interpreter and Other Assistance Information.

Yes  No

### Important Notices

By submitting this Application and Agreement for Placement on the Maryland Lottery and Gaming Control Commission's Voluntary Exclusion List ("Commission's Voluntary Exclusion List"), you are asking to be placed on the Commission's Voluntary Exclusion List within the State of Maryland. This means that you are voluntarily saying you do not want to participate in the gaming-related activities that you identify in Section 1, *Select Your Exclusion*. If you are approved to be on the Commission's Voluntary Exclusion List, you will not be allowed to do those gaming-related activities in Maryland. The businesses that offer these gaming-related activities are required to stop you from being on their premises or online site. You will be prohibited from participating in the gaming-related activities. You could be arrested if you try to enter a place that offers the kind of gaming from which you want to be excluded.

After you complete this Application and Agreement, we will review it and let you know whether your application is approved. If approved, you are placed on the Commission's Voluntary Exclusion List. If you are placed on the Commission's Voluntary Exclusion List, we will notify businesses that operate the gaming activity that you selected for exclusion. We will inform those businesses that you are not allowed to be on their premises or online site. Further, we will inform them that you are not allowed to do any gaming with them, in-person or online. In other words: **If we approve your application and place you on the Commission's Voluntary Exclusion List, you will be prohibited from all gaming-related activities that you choose in Section 1 of this Application, such as: casino gambling, playing the Lottery, playing Instant Bingo at facilities with more than 10 instant bingo machines, participation in fantasy competitions, and sports wagering.**

You are releasing the State from any liability that results from you submitting your application. This is described in Section 6, *Certifications, Waiver and Release from Liability, and Execution of Agreement*.

Your exclusion will be effective, and will be enforced, for the period you select in Section 1 of this Application. *You will stay on the Commission's Voluntary Exclusion List for at least two years, regardless of any personal changes. No exceptions.*

***You will not be automatically removed from the Commission's Voluntary Exclusion List.*** To be removed, you must send a request in writing to the Commission's Responsible Gaming Department at 1800 Washington Blvd., Suite 330, Baltimore, MD 21230 or email at [responsible.gaming@maryland.gov](mailto:responsible.gaming@maryland.gov) showing that you meet all the requirements in Code of Maryland Regulations ("COMAR") 36.01.03.06. The Responsible Gaming Department will review your request, and let you know if you can be removed from the List.

**Initial here if you understand these Important Notices \_\_\_\_\_**

*If you do not understand these Important Notices, stop here. Ask any questions you have to the Agency Staff that provided this form to you. If you still do not understand these Important Notices or there is no Agency Staff, stop here, and request the assistance of the Responsible Gaming Department at 410-230-8798 or [responsible.gaming@maryland.gov](mailto:responsible.gaming@maryland.gov).*



**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Height:** \_\_\_\_ Feet \_\_\_\_ Inches **Weight:** \_\_\_\_ lbs.

**Gender:**  Male  Female  Nonbinary  Gender Not Listed  Prefer Not to Answer

**Hair Color/Bald:** \_\_\_\_\_ **Eye Color:** \_\_\_\_\_

**Are you of Hispanic or Latino origin?**  Yes  No

**Racial Category – Select all applicable:**

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Other \_\_\_\_\_

**Complexion:**  Light  Medium  Dark

**Other Distinguishing Physical Characteristics** (birth marks, scars, tattoos, etc.): \_\_\_\_\_

**Notices about my personal information:**

The Commission is collecting my personal information so that I can be voluntarily excluded from the gaming activities I selected. If I do not provide all the information required on this form, my application will be rejected. I may inspect, amend, or correct the personal information the Commission collects about me. The Commission will maintain my personal information as sociological information under State law, and it is not generally available to the public. The Commission will share my personal information with me or only as authorized by law.

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### **Section 3.1: Acknowledgments – Applies to All Requests for Voluntary Exclusion**

*Initial each statement to show that you understand the statement and that it is true.*

\_\_\_\_\_ I am sober. I am not presently impaired by, or under the influence of, any alcoholic beverage, drug (prescription or not), or other substance, or suffering from any mental health condition, that impairs my ability to make a sober and informed decision.  
*If you disagree with this statement, stop.*

\_\_\_\_\_ I am requesting to be included on the Commission’s Voluntary Exclusion List of individuals with gambling problems who have requested to be excluded from any form of gambling listed in Section 1.

\_\_\_\_\_ By completing this Application and Agreement to be placed on the Commission’s Voluntary Exclusion List, I am saying that I want to be excluded or prevented from participating in each gaming activity I selected in Section 1, for at least 2 years.

\_\_\_\_\_ **I understand that my exclusion does not automatically end. After at least 2 years, I can apply to be taken off of the Commission’s Voluntary Exclusion List, as described above in the *Important Notices* section of this Application and as outlined at [mdgamblinghelp.org](http://mdgamblinghelp.org).**

\_\_\_\_\_ The information that I have provided in this Application and Agreement is accurate and true.

**If the Commission accepts my Application and puts me on the Commission’s Voluntary Exclusion List, I understand and acknowledge that:**

\_\_\_\_\_ The Commission will give my identifying information to the gaming businesses that operate gaming activities I want to be excluded from.

\_\_\_\_\_ All gaming businesses that operate the gaming activities I asked to be excluded from are required to prevent me from gaming on their premises, or online site.

\_\_\_\_\_ All gaming businesses that operate the gaming activities I asked to be excluded from are required to collect, withhold, or divert any winnings I win while I am on the Commission’s Voluntary Exclusion List.

\_\_\_\_\_ If I asked to be excluded from an in-person gaming activity, and I go to a place that offers that in-person gaming activity, The gaming business must eject me from the premises and I may be subject to arrest for criminal trespass. I may also be subject to other criminal charges related to my presence on the property.

\_\_\_\_\_ My exclusion from a gaming activity may result in my forfeiture of unredeemed items, accumulated rewards points, and other benefits. “Unredeemed items” generally means a noncash item that has monetary value, like a token, voucher, ticket, chip, coupon, or similar item. By submitting this Application, I contractually agree that, if I participate in a gaming activity that I chose to be excluded from in Section 1, I will redeem or liquidate all unredeemed items that have monetary value that I have in my possession since being placed on the Commission’s Voluntary Exclusion List and designate that their proceeds be contributed to the Problem Gambling Fund. In other words, I am not allowed to collect any prize or keep any unredeemed items while I am on the Commission’s Voluntary Exclusion List, and I am agreeing to give them up.

\_\_\_\_\_ My exclusion from a gaming activity means that a gaming business from which I am excluded can suspend or cancel my gaming accounts, including player rewards accounts. This means I could lose my accumulated rewards points or other benefits.

\_\_\_\_\_ My exclusion from a gaming activity in Maryland could affect my ability to gamble in other jurisdictions. If I am excluded from a gaming business in Maryland, and that business has an affiliated gaming business in another jurisdiction, an out-of-state gaming business could exclude me from gaming activities and platforms just because I am excluded in Maryland. In other words, a gaming business in another jurisdiction could ban me from gambling if they are related to a Maryland gaming business or brand.

\_\_\_\_\_ I am applying for the Commission’s Voluntary Exclusion List of my own free will.

\_\_\_\_\_ If I am placed on the Commission’s Voluntary Exclusion List, Maryland gaming businesses associated with the gaming activity that I selected in Section 1 will receive information about me from this Application and Agreement, so that they can remove or prevent me from gaming at or through their properties or platforms. This exclusion will continue until I am removed from the Commission’s Voluntary Exclusion List.

\_\_\_\_\_ I cannot shorten the time that I am on the Commission’s Voluntary Exclusion List, even if my personal circumstances change. I will be on the List for at least two years, and maybe for life.

\_\_\_\_\_ I will never be automatically removed from the Commission’s Voluntary Exclusion List. If I want to be removed after 2 years, I must make a written request for removal, and the Commission must decide whether to grant it. Commission regulations in COMAR 36.01.03 explain the process.

\_\_\_\_\_ My placement on the Commission’s Voluntary Exclusion List means that I will not receive direct marketing and promotional materials about gaming activities.

\_\_\_\_\_ My placement on the Commission’s Voluntary Exclusion List does not release me from any debts I incurred before, or may incur during, my exclusion period.

\_\_\_\_\_ The Commission will use the information that I provide in this Application and Agreement to decide whether I am eligible to be on the Commission’s Voluntary Exclusion List. If I am eligible and my Application is accepted, I will be placed on the list.

\_\_\_\_\_ If I refuse to, or cannot, provide information required on this Application, the Commission may reject my Application.

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### **Section 3.2: Acknowledgments – Applies to Casinos Only**

*If have requested to be excluded from Maryland casinos, initial each statement if you understand the statement and it is true.*

**If the Commission accepts my Application and puts me on the Commission’s Voluntary Exclusion List for Maryland casinos, I understand that:**

\_\_\_\_\_ I will be prohibited from entering a Maryland casino, and playing a table game or a video lottery terminal (slot machines).

\_\_\_\_\_ If I enter a casino, casino staff will remove me from the casino, and prevent me from collecting any winnings. If the casino allows sports wagering, I will not be allowed to use, or collect winnings on, the casino’s in-person, online or mobile sports wagering platform, associated fantasy competition operator’s platform, or any other gaming platform.

\_\_\_\_\_ It will be my sole responsibility to stop going to, and gambling in, all Maryland casinos.

\_\_\_\_\_ If a Maryland casino has affiliated casinos in other jurisdictions, I may be banned from them, and from using any player rewards benefits at those casinos.

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### **Section 3.3: Acknowledgments – Applies to Lottery Only**

*If you requested to be excluded from Lottery play, initial each statement if you understand the statement and it is true.*

**If the Commission accepts my Application and puts me on the Commission’s Voluntary Exclusion List for Lottery, I understand that:**

\_\_\_\_\_ I will be prohibited from playing any Lottery game, or participating in any Lottery promotion, including My Lottery Rewards™.

It will be my sole responsibility to stop:

\_\_\_\_\_ a) Purchasing (in-person or by subscription) or playing any ticket offered by the Maryland Lottery, which means scratch-offs, Pick 3, 4, or 5, and draw games like Mega Millions, Powerball, Cash4Life, and Cash Pop, Fast Play games, and monitor games like Keno, Racetrax or any game offered by the Maryland Lottery in the future.

\_\_\_\_\_ b) Participating in the Maryland Lottery My Lottery Rewards™ Program, or any other Maryland Lottery promotion or game.

\_\_\_\_\_ For My Lottery Rewards (MLR), any entry submitted with my name and any points related to my name are invalid and void, and: will not be considered in relation to any aspect of MLR; no reward or prize will be awarded; no subscription will be paid; and my MLR account may be closed.

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### **Section 3.4: Acknowledgments – Applies to a Bingo Facility with more than 10 Instant Bingo Machines Only**

*If you requested to be excluded from bingo facilities with more than 10 instant bingo machines, initial each statement if you understand the statement and it is true.*

**If the Commission accepts my Application and puts me on the Commission’s Voluntary Exclusion List for instant bingo, I understand that:**

\_\_\_\_\_ I will be prohibited from playing an instant bingo machine at an instant bingo facility with more than 10 instant bingo machines.

It will be my sole responsibility to stop:

\_\_\_\_\_ a) Entering the premises of an instant bingo facility that has more than 10 instant bingo machines; and

\_\_\_\_\_ b) Playing an instant bingo game or other gaming-related activities at an instant bingo facility with more than 10 instant bingo machines.

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### **Section 3.5: Acknowledgments – Applies to Fantasy Competitions Only**

*If you requested to be excluded from fantasy competitions, initial each statement if you understand the statement and it is true.*

**If the Commission accepts my Application and puts me on the Commission’s Voluntary Exclusion List for fantasy competitions, I understand that:**

\_\_\_\_\_ I will be prohibited from participating in a fantasy competition offered by a Commission-registered fantasy competition operator.

\_\_\_\_\_ It will be my sole responsibility to stop participating in fantasy competitions offered by Commission-registered fantasy competition operators.

\_\_\_\_\_ A fantasy competition operator may ban me from their other offerings (i.e. sports wagering).

\_\_\_\_\_ A fantasy competition operator may ban me from participating in a fantasy competition offered by that operator or an affiliate of that operator in another jurisdiction.

\_\_\_\_\_ If I enter a casino with an associated sports wagering operator that offers fantasy competitions, casino staff will remove me from the casino, and prevent me from collecting any winnings. I will not be allowed to use, or collect winnings on, the casino's in-person, online, mobile or in-person sports wagering, associated fantasy competition operator's platform, or any other gaming platform.

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### **Section 3.6: Acknowledgments – Applies to Sports Wagering Only**

*If you have requested to be excluded from Sports Wagering, initial each statement if you understand the statement and it is true.*  
**If the Commission accepts my Application and puts me on the Commission's Voluntary Exclusion List for sports wagering, I understand that:**

\_\_\_\_\_ I will be prohibited from participating in sports wagering in Maryland, in-person, or online (i.e. through a computer, mobile device, or other means).

\_\_\_\_\_ I will be prohibited from entering the sports wagering-related area of any business where sports wagering is conducted, including, OTBs, and other areas.

\_\_\_\_\_ I will be prohibited from entering a Maryland casino that offers sports wagering.

\_\_\_\_\_ If a Maryland sports wagering business has an affiliated sports wagering business in another jurisdiction, I may be banned from engaging in sports wagering with those businesses in-person and online. Additionally, I may be prohibited from using any player rewards benefits I may have accrued in Maryland.

\_\_\_\_\_ A Maryland sports wagering business may remove me from the premises, prevent me from using their affiliated sports wagering platform, or suspend my account, in another jurisdiction.

\_\_\_\_\_ It is my sole responsibility to stop participating in sports wagering offered by a Maryland sports wagering licensee, in-person (at casinos, OTBs, anywhere else), or online (i.e. through a computer, or mobile device, or other means).

\_\_\_\_\_ If I enter a casino that offers sports wagering, casino staff is required to remove me from the casino, and prevent me from collecting any winnings. I am not allowed to use, or collect winnings on, any gaming activity offered by that casino whether in-person, or online, for sports wagering or any other gaming platform.

\_\_\_\_\_ A sports-wagering operator may ban me from their associated offerings, such as fantasy competitions.

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### **Section 3.7: Acknowledgment – Employment Consideration – If Applicable**

My employment and job duties require me to enter or work in a Maryland casino, an instant bingo operation with more than 10 instant bingo machines, or a place where sports wagering is offered or conducted.

*If applicable:*

Employer \_\_\_\_\_  
Job Title \_\_\_\_\_ Maryland Gaming License Number (if applicable): \_\_\_\_\_  
Name(s) of casino, bingo hall, or sports wagering facility \_\_\_\_\_

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### **Section 4: Interpreter and Other Assistance Information**

Only a State-approved Interpreter can be used for an applicant requiring Interpreter services.

Date used: \_\_\_\_\_

Language Identified for Applicant: \_\_\_\_\_

Language Solution's MLGCA ID#: \_\_\_\_\_

If other assistance was required, please explain: \_\_\_\_\_

Describe services used for other assistance: \_\_\_\_\_

**Section 5: Maryland Residents Only**

**Maryland Center for Excellence on Problem Gambling (MCEPG)– Consent for Contact**

MCEPG promotes healthy and informed choices regarding gambling and problem gambling. Do we have permission to give the MCEPG your name and contact information so that they may contact you and give you information about responsible gambling help that is free and confidential?

Yes  No

If yes, how would you like to be reached: \_\_\_\_\_

**Section 6: Certifications, Waiver and Release from Liability, and Execution of Agreement**

My completing and submitting this Application and Agreement, or anything that happens because I complete and submit this document, does not create any cause of action, right of action, claim, or other right whatsoever in favor of any person against the State of Maryland, the Maryland Lottery and Gaming Control Agency, the Maryland Lottery and Gaming Control Commission, or their employees, agents, and representatives. I expressly and forever release, hold harmless, and discharge the State of Maryland, the Maryland State Lottery and Gaming Control Agency, the Maryland Lottery and Gaming Control Commission, and their employees, members, agents and representatives, from any liability to me and my heirs, administrators, executors, and assignees for any harm, monetary or otherwise, that may arise out of, or by reason of any act or omission relating to, this Application and Agreement for placement on the Commission’s Voluntary Exclusion List and any request for removal from the Commission’s Voluntary Exclusion List, including: (1) processing or enforcing an application or a removal request; (2) for any gaming business with which I have an account – or their affiliates in another jurisdiction - withholding account benefits, points, or privileges from me, or failing to restore accounts, account benefits, points, or privileges to me; (3) allowing me to engage, or preventing me from engaging, in gaming activity while I am on the Commission’s Voluntary Exclusion List; and (4) disclosure of information about me to any individual, group, or entity as authorized by law, regulation, or me, except for an unlawful disclosure of such information. I accept the risk of potential or actual adverse public notice, embarrassment, criticism or other action, including any financial loss, which may directly or indirectly result from my completion and submission of this Application and Agreement. I have completely read this Application and Agreement, I fully and clearly understand it, and I am voluntarily and knowingly signing this Application and Agreement. I agree to be bound by its terms.

- 1. I HAVE COMPLETELY READ THIS APPLICATION AND AGREEMENT, I FULLY AND CLEARLY UNDERSTAND IT, AND I AM VOLUNTARILY AND KNOWINGLY SIGNING THIS APPLICATION AND AGREEMENT. I AGREE TO BE BOUND BY ITS TERMS.

\_\_\_\_\_  
Signature of Applicant for Voluntary Exclusion

\_\_\_\_\_  
Date

**A. INTERNAL: MLGCA Staff Certification**

I witnessed \_\_\_\_\_ sign his/her name to this Application and Agreement, and I certify that:

This individual does not appear to be under the influence of any alcoholic beverage or drug, and appears to be knowingly and voluntarily applying for the Commission’s Voluntary Exclusion List. The signature, physical description and identity of the individual match the individual’s photograph and credentials, photocopies of which are attached to this Application and Agreement. The Application and Agreement is complete. I informed the individual that he/she will be notified, in writing, about whether the Application is approved, and that, if approved, the individual will be placed on the Commission’s Voluntary Exclusion List.

\_\_\_\_\_  
Signature of MLGCA Staff

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Location

Revised 5/13/2025

<b>For Internal Use Only</b>	
Date Received: _____	Date Processed: _____
By: _____	
Accepted: _____	Denied: _____