

PATRON'S REQUEST TO SELF-EXCLUDE

GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino has a commitment to promote public awareness and education and to provide information on available resources to those patrons who believe they may have a gambling problem. GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino maintains a program in compliance with Nevada Gaming Commission Regulation 5.170 that allows our patrons to voluntarily self-exclude themselves from certain activities and privileges, which are provided as a service and convenience to our patrons.

1. I, the undersigned patron hereby requests to self-exclude my access to gaming and related activities, services and programs, including use of the casino or access to wagering of any kind. I agree to be prohibited from receiving casino player club privileges, personal check cashing privileges, casino credit privileges, direct mail marketing promotional material and complimentaries and from participating in player recognition programs (such as the "Westgate Players Card"). This self-exclusion will be effective within five (5) days of receipt of such request by *GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino*. I understand that no further points, rewards or benefits may be accumulated or redeemed from the player recognition programs I have participated in and that any existing points will be forfeited.
2. I understand that *GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino* shall endeavor to honor my request to self-exclude my access and use as described above. However, I understand and agree that *GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino* does not assume any liability or responsibility for any failure to comply with this request. I understand that *GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino* shall continue to honor my request to self-exclude myself unless and until I request to rescind the voluntary self-exclusion. I agree that my request to rescind must be in notarized writing, in a form approved by *GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino* (located at the Main Cage) and that **I shall not be allowed to make such a reinstatement request earlier than sixty (60) days after the effective date of this self-exclusion request.**
3. I have been advised that if I receive check cashing/credit privileges, direct mail or promotional materials after the effective date of this self-exclusion, or if I have questions concerning this policy, I should immediately contact the Director of Cage Operations of *GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino* at (702) 732-5576. I acknowledge that for my request for self-exclusion to be truly effective, I must refrain from gambling or seeking any revoked privileges or services that are the subject of this request.
4. I agree that this self-exclusion request does not release me from any debts incurred by me either prior to the effective date of this self-exclusion request or thereafter incurred by me, even if such is a violation of my self-exclusion.
5. I understand that *GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino* Responsible Gaming Program shall not in any way be construed as an agreement by *GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino* to assume liability or responsibility of my gaming activities. My decision to gamble at *GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino* remains solely my decision notwithstanding any gambling problem I may have or my enrollment in the Responsible Gaming Program.

This request cannot be processed without the accurate verification of the information requested below. *GV Tenant, Inc. dba: Westgate Las Vegas Resort & Casino* reserves the right to investigate all information provided for accuracy.

PLEASE PRINT NEATLY. Requests can be hand-delivered to the Main Cage with valid identification credentials. Requests can also be mailed *Westgate Las Vegas Resort & Casino*, 3000 Paradise Road, Las Vegas, NV 89109, in which case your signature must be notarized.

Full Name: _____ Aliases or Nicknames Used: _____
 Date of Birth: _____ Social Security #: _____
 ID/Driver's License # and State: _____ Area Code/Phone: _____
 Mailing Address: _____ Player Card #: _____

Signature _____ Date: _____