

GAMBLING SELF-EXCLUSION CHECKLIST

This document should be placed at the front of the patron's file.

PATRON'S NAME:		
The following items are to be completed by the manager processing the evaluaion		
The following items are to be completed by the manager processing the exclusion		
☐ Self-Exclusion Agreement completed (including signature of patron and witness)		
☐ Schedule completed (only required if patron wishes to exclude from multiple clubs)		
☐ Photograph taken of patron		
☐ Photocopy taken of identification (e.g. Driver Licence, Passport, NSW Photo Card)		
☐ Photocopy of Self-Exclusion Agreement provided to patron		
☐ BetSafe RSG brochure and/or BetSafe business card provided to patron		
☐ Template 'Gambling Self-Exclusion Letter' provided to patron		
☐ Membership card returned (if patron is a member and has not requested a partial exclusion)		
Patron free to go at this point		
☐ BetSafe Incident Report or Risk Manager Report completed		
Details of staff member completing this section:		
Name: Position:		
The following items are to be completed by the gaming department or administration staff		
☐ Patron's details added to club's internal exclusion register/s		
☐ Membership notified of exclusion (for removal from membership and marketing databases)		
☐ Internal memo distributed to relevant staff advising of exclusion		
□ Documentation faxed (02 9874 3186) or emailed (enquiries@betsafe.com.au) to BetSafe		
☐ Colour photograph of patron emailed (enquiries@betsafe.com.au) to BetSafe		
□ Documentation filed		
Details of staff member completing this section:		
Name: Position:		



GAMBLING SELF-EXCLUSION AGREEMENT

This form is to be completed for both single venue and multiple venue self-exclusions

Full Name:	Other Name/Alias:
Date of Birth://	ID Type/Number:
Residential Address:	
Phone: (home / work / mob):	Email:
Membership No:	Preferred contact method: mail / phone / email / no contact
I ask that Queanbeyan Sports & Community all parts of the Club ("nominated area") in order	Club ("the Club") prevent me from entering and remaining in to prevent me from gambling.
I understand that where the Club has amalgam excluded from the nominated area in all clubs in	nated with other clubs or is part of a group of clubs, I will be the group.
I undertake that I will not enter the nominated ar	ea in the Club or gamble in the Club while I remain excluded.
I agree to return any membership card to the Clu	ub (where applicable).
I understand that I may be removed from the Clu	ub if I am found in the nominated area of the Club.
I acknowledge that the Club will not be oblig at the Club in breach of this agreement.	ged to pay to me any prize that I may win while gambling
of six (6) months commencing today. I agree to	itted to the nominated area in the Club for a minimum period of the Club retaining the right to refuse any admission and/or ntil the Club is satisfied that I have sought appropriate em.
I understand that, while the Club will take all reaccepts no liability for losses I may suffer by rea	asonable steps necessary to enforce my exclusion, the Club son of any failure to enforce this agreement.
	d being used for the purpose of enforcing my exclusion from e of my identity as may be reasonably requested by the Club.
	fidentiality of this agreement other than any disclosure that is veb-based database. I authorise the Club to give or receive gambling to BetSafe.
I am aware that BetSafe provides a free and hours a day on 1800 BETSAFE (1800 238 723).	confidential counselling service which can be contacted 24
I acknowledge that I have been given an opporat my own expense as to the meaning and effect	tunity to seek independent legal or other professional advice at of this agreement before signing.
I make this application of my own free will.	
Signed:	Date: / /
Witnessed:	Date: //

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SCHEDULE - MULTIPLE VENUES

This form only needs to be completed if the patron wishes to exclude from multiple venues.

Please enter the <u>individual names</u> of any <u>additional venues</u> from which you would like to be excluded: (we cannot process blanket requests such as "All BetSafe Clubs" or "All Clubs in NSW")

1	6.	
2	7	
3	8	
4	9	
5	10	
I agree that all terms of the above Self-Exclusion Agreement shall apply between myself and every one of the above venues listed in this Schedule ("additional venues") as if those were the original party defined as "the Club".		
I understand that the additional venues may not be under any obligation to accept my request for self-exclusion. Whilst the Club and BetSafe may take reasonable steps to notify me if any of the additional venues are not willing to accept my request for exclusion, I understand that I may not be notified in this event.		
I understand that I can contact any of the additional venues directly to request self-exclusion if they do not accept this request for self-exclusion.		
Signed:	Date://	
Witnessed:	Date:/	

NOTE: THIS FORM CANNOT BE USED TO EXCLUDE FROM THE STAR CASINO

To self-exclude from The Star Casino, contact their security department on 02 9777 9000



GAMBLING SELF-EXCLUSION LETTER TO PATRON

This letter is to be completed by the duty manager only if the patron has requested no correspondence by mail.

/(date)
(patron name)
(patron address line 1)
(patron address line 2)
Dear, (patron name)
I am enclosing a copy of your Self-Exclusion Agreement which was signed by you or/, the conditions of which are set out in the document.
Please be advised that BetSafe provides a free and confidential problem gambling counselling service to patrons of this club. I strongly urge you to contact the BetSafe 24 hour counselling hotline on 1800 BETSAFE (1800 238 723) and arrange an appointment or to discuss ways in which they are able to assis you in overcoming your gambling problem.
As you are aware, the Self-Exclusion Agreement operates for a minimum period of six months. Should you wish to return to the club after that time you must attend a readmission interview, with evidence that you have taken steps to address your gambling problem. The necessary documentation can be arranged through BetSafe by contacting them on the above number.
As part of the club's self-exclusion procedure, our marketing department will be notified and arrangements have been made to ensure that you do not receive any marketing material during your period of self-exclusion. Please note that this can take up to 2 weeks to take effect.
On behalf of the club, I would like to congratulate you on taking this most important step. If there is anything the club can assist you with, please do not hesitate to contact me personally.
I wish you all the best in the future.
Yours faithfully,
(manager's signature)
(manager's name)
(manager's title)



INCIDENT REPORT FORM

Club: Queanbeyan Sports & Community Club	
Date of incident: / /	Time of incident:
Details of person about whom the report relates to	o:
Patron Name:	Membership # (if applicable):
Details of staff member approached:	
Staff Name:	Position:
Outline full details of approach:	
Outline assistance provided:	
Details of staff member completing report:	
Name:	Position:
Sent to BetSafe by fax (02 9874 3186) or email (enqu	uiries@betsafe.com.au) on / /

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