Self-exclusion Notice

Nominate the operators you are seeking to exclude from

Fields marked with asterisk (*) are mandatory.

Sports Bookmaker(s)/Betting Exchange Operator(s) licensed in the Northern Territory

Sports Bookmaker*	Yes /	No	Betting Excha	nge Ope	rator*	Yes / N	o All*	Yes / No			
Trading names* (only mandatory to complete if person does not want to exclude from "all" Sports Bookmaker(s)/Betting Exchange Operator(s) licensed in the NT).											
Personal Details of p	erson se	eking exc	clusion								
Full name* (middle name include											
Aliases* (also known as)											
Date of birth*				•	Gender						
Email address*				1		1					
Home address*											
Postal address											
Mobile number	mber Home number										
Exclusion Period											
How long do you wis excluded for?*	sh to be	Year(s)		Month	(s)		Permanent	Yes / No			
Photo identification											
Select your proof of	identity.	A copy m	nust be lodged	with this	s applica	tion.*					
Passport Yes / N	lo			Oriver's l	icence	Yes /	No				
Counselling, informa	tion and	support									
Free and confidential Gambling Helpline on There are a wide rang are open to people w Each state and territo financial counselling f	1800 85 e of reso th a gaml ry has a r	8 858 or urces ava oling addi ange of co	visiting their we ilable for anyon ction, as well as ounselling servi	ebsite: <u>w</u> ne affecte s their fri ices whic	ww.gam ed by gar ends and h may he	blinghelpo mbling acr I families. elp with a	online.org.au oss Australia.	These services			

To find out where your closest service is located, call the Gambling Helpline or visit their website for a referral to

a friendly and non-judgemental professional. The Gambling Helpline can organise an interpreter for you.



Statement

I wish to be excluded from wagering with the nominated Sports Bookmaker(s)/Betting Exchange Operator(s) licensed in the NT, in accordance with the NT Code of Practice for Responsible Service Online Gambling 2019. In completing and lodging this Self-exclusion Notice with the Racing Commission, I understand and agree that:

- 1. During the Exclusion Period:
 - a. I will not wager or attempt to wager with the nominated Sports Bookmaker(s)/Betting Exchange Operator(s), including via websites, mobile apps and telephone wagering; and
 - b. The nominated Sports Bookmaker(s)/Betting Exchange Operator(s) may restrict my ability to access my account(s) and their websites, mobile apps and telephone wagering facilities.
- 2. Where I have sought a permanent exclusion, the nominated Sports Bookmaker(s)/ Betting Exchange Operator(s) may also close my account(s).
- 3. The Personal Details and other personal information contained in this form are collected by Licensing NT on behalf of the Racing Commission for the purpose of fulfilling its functions under the *Racing and Betting Act* 1983 (NT).
- 4. I consent to this Notice (including my Personal Details and the Exclusion Period) being provided to the nominated Sports Bookmaker(s)/Betting Exchange Operator(s) licensed in the Northern Territory, where it may be placed on the Responsible Gambling Incident Register(s) held by those Sports Bookmaker(s)/Betting Exchange Operator(s).
- 5. Where I have applied to be excluded from all Sports Bookmaker(s)/Betting Exchange Operator(s) licensed in the Northern Territory, the Racing Commission or Licensing NT will endeavour to provide this Notice to any new Sports Bookmaker(s)/Betting Exchange Operator(s) which become licensed after lodgement of this form.
- 6. It is not the role of the Racing Commission or Licensing NT to exclude individuals from gambling, and it is not the responsibility of the Racing Commission or Licensing NT to exclude me from gambling.
- 7. My exclusion from using the gambling products and services of the nominated Sports Bookmaker(s)/Betting Exchange Operator(s) is voluntary, and the onus is on me to abide by the exclusions I have specified in this Notice.
- 8. I have the right to seek independent legal or other professional advice before signing and lodging this Notice.

Declaration									
I have read and unders	Yes / No								
Your signature*				Date*					
Witness details and signature									
Witness full name*									
Contact number*		Contact address*							
Witness signature*				Date*					
Disclaimer									

Whilst all care will be taken by the Racing Commission and Licensing NT in processing this Notice and providing it to nominated Sports Bookmaker(s)/Betting Exchange Operator(s), no responsibility is accepted by the Racing Commission, Licensing NT or the Northern Territory Government for any acts or omissions with respect to this Notice or for any losses occasioned to any person as a result of reliance on this Notice.

Further information

 ${\it Email your completed form and photo identification to \underline{{\it LicensingNTSportsBookmakers.DOB@nt.gov.au}}\\$

Level 3 NAB House, 71 Smith Street, Darwin NT 0800 Web: www.justice.nt.gov.au

GPO Box 1154, Darwin NT 0801 Phone: 08 8999 1800 Fax: 08 8999 1888