



Remember, It's Just A Game

We at Vernon Downs Casino and Hotel have a moral, social, and business responsibility to promote responsible gaming and to strictly enforce the minimum legal wagering age. All employees at Vernon Downs Casino and Hotel are trained to recognize and respond appropriately when a guest gaming problem becomes apparent.

If you feel that you have a gaming problem and need assistance, we can help. Our voluntary self-exclusion program is available on property and further assistance is available from the New York Council on Problem Gambling, which can be reached at 1-877-8HOPE-NY, or by visiting their website, [here](#).

VERNON DOWNS CASINO AND HOTEL SELF EXCLUSION PROGRAM

WHAT IS THE SELF-EXCLUSION PROGRAM?

The program was established to allow people who may have a gambling problem to voluntarily exclude themselves from wagering activities at Vernon Downs Casino and Hotel and all video gaming (lottery) facilities in New York State.

HOW DO I GET PLACED ON THE SELF-EXCLUSION LIST?

You may obtain information and an application form by using one of the following methods:

1. [Click here](#) for a self exclusion form
2. Visit Vernon Downs Casino and Hotel and request to speak with the Manager On Duty and Security Supervisor

You must complete the form and provide identification that includes your signature and either a photograph or physical description of yourself. When you file the form, you will be photographed. That photo and other identifying information will be displayed to employees in non-public areas to assist with enforcement of your request.

CAN I JUST MAIL BACK THE COMPLETED FORM?

Yes. If you send it via mail, you must include a picture of yourself and have a Notary Public sign the form attesting that the picture of the person included and the signature on the form is yours. Please [click here](#) for the self exclusion form. It should then be mailed to:

Director of Security
Vernon Downs
P.O. Box 509
Nichols, NY 13812

WHAT HAPPENS IF I GO TO VERNON DOWNS CASINO AND HOTEL AND PLAY?

After you are placed on the self-exclusion list, property personnel may refuse to accept your wagers or ask you to leave the gaming area. If you do gamble, you would be unable to collect any winnings or recover any losses. Additionally, you will not be able to receive complimentary goods or services or participate in promotional offerings.

HOW LONG WILL I BE ON THE SELF-EXCLUSION LIST?

That is up to you. When you request self-exclusion, you will choose whether you want to be excluded for a minimum of one year, three years or five years. If you choose the one year or five year option, you must remain on the list for at least that length of time. After that time expires, you may ask to be removed.

FOR MORE INFORMATION

For more information on the process, please call Vernon Downs Casino and Hotel security department at 1-877-88-VERNON ext. 3601



You must be 18 to play video gaming machines. Please play responsibly.

WAIVER AND RELEASE

I hereby release and forever discharge the State of New York, New York State Lottery, Vernon Downs Casino and Hotel and its employees, agents, and all gaming licensees and their employees and agents from any liability to me and my heirs, administration, executors and assigns for any harm, monetary or otherwise, which may arise out of or by reason on any act or omission relating to this request for self-exclusion or my request for removal from the self-exclusion list including (1) its processing or enforcement, (2) the failure of a gaming licensee to withhold gaming privileges from, or restore gaming privileges to me, (3) permitting me to engage in gaming activity in a licensed gaming and raceway or simulcast facility while on the list of self-excluded persons, (4) disclosure of the information contained in the self-exclusion request or list, except for a willfully unlawful disclosure of such information.

ACKNOWLEDGEMENT

I am voluntarily requesting exclusion from all gaming activities at Vernon Downs Casino and Hotel. I certify that the information that I have provided above is true and accurate, and that I have read, understand, and agree to the waiver and release included with the request for self-exclusion. I am aware that my signature below authorizes Vernon Downs Casino and Hotel to enforce my exclusion indefinitely. At the conclusion of the self-exclusionary period I have selected, I may apply for reinstatement of my gaming privileges by submitting a written request to Vernon Downs Casino and Hotel. I understand that I may not apply for reinstatement until this period expires, and I understand that I will be excluded indefinitely until such time as I apply for reinstatement. I understand that if I am found within the video lottery gaming facility after having been voluntarily excluded, I will be subject to arrest for criminal trespass if I refuse to be escorted from the facility. Further, I authorize the video lottery gaming agent to send a copy of my request to each video lottery gaming facility located within New York State. I am aware and agree that during any period of self-exclusion, I shall not collect any winnings or recover any losses resulting from any gaming activity at Vernon Downs Casino and Hotel and that any money or thing of value obtained by me from, or owed to me by Vernon Downs Casino and Hotel as a result of wagers made by me while on the self-exclusion list shall be subject to forfeiture. Furthermore, I agree that any money or thing of value obtained by me from, or owed to me, by Vernon Downs Casino and Hotel as a result of wagers made by me while on the self-exclusion list shall be subject to forfeiture. I am aware that during my period on the self-exclusion list I will be denied access to any player club promotions, offers or memberships relating to gaming activities at Vernon Downs Casino and Hotel.

SIGNED _____
DATE _____

Only if Mailed:
NOTARY PUBLIC SIGNATURE: _____ DATE _____

I hereby certify that the above signed individual appeared before me on the date indicated.
TYPE OF I.D. OFFERED _____

I certified that the signature of the person requesting suspension of gaming privileges appears to agree with that contained on the above identification credentials, and any physical description or photograph of the person appears to agree with his or her actual appearance.

Facility Representative VLT Lic# _____ DATE _____