



# National Gambling Self Exclusion Agreement – SE1

Please read this agreement carefully before completing and signing it.

**Please complete this section**

Your address:.....

Title: Mr/Mrs/Miss/Ms (delete as appropriate) .....

First name(s): .....

Family name: .....

Date of birth: ..... / ..... / .....

Post code: .....

Please read this agreement carefully before completing and signing it. Once completed please take forms SE1, SE2 and SE3 to any 'Count Me Out' members premises or to a designated, responsible person (see overleaf or the ID checking process) along with two recent colour photographs and a form of photo ID. If you have downloaded this form from the internet please ensure you complete 3 copies each of forms SE1, SE2 and SE3.

**We strongly recommend you call the GamCare Helpline 0845 6000133 for confidential help and advice.**

I request that I be refused entry to all 'Count Me Out' members premises that I have listed on form SE2 dated ..... / ..... / ..... for a period of: 6 months (minimum) [ ] 12 months [ ] 5 years [ ] other (please state) .....

I fully understand the consequences of self exclusion and accept that I am not allowed to modify, revoke or rescind my self-exclusion prior to the expiry of this agreement. I understand that my self-exclusion will include 'Count Me Out' member's premises that join the scheme after the commencement of this contract.

I will not attempt to place a bet of any sort within the premises named and indicated on form SE2 or SE3 and in the unlikely event that the bet is accepted, I will not make any claim against N.S.E.P. CIC, a 'Count Me Out' member, manager, employee or worker for the return of any stakes placed or otherwise once the event has been completed.

I release N.S.E.P. CIC and all 'Count Me Out' members, their managers and employees from any liability or claims in the event that I fail to comply with this voluntary self exclusion. I understand that if I attend any of the 'Count Me Out' member's premises that I have chosen to exclude myself from as set out in this agreement during the term of the exclusion and I am identified by staff, I will be requested to leave the premises. If I refuse and or become a trespasser I will be removed.

I accept and agree to other 'Count Me Out' members, Support Agencies and Counsellors being made aware of this self exclusion and accept that they will update N.S.E.P. CIC regarding my activities in their premises and other gambling premises. I agree to my details including my photograph being held on a central database for the entire period of the agreement and for it to be shared with other 'Count Me Out' members. I agree to be contacted by N.S.E.P. CIC or other help groups prior to the termination of this agreement in order that it can be reviewed and evaluated.

I understand that my self-exclusion will remain in place indefinitely unless I make a positive request to N.S.E.P. CIC or a 'Count Me Out' member in order to gamble again after the expiry of my self-exclusion period. I accept that a one day cooling off period will then be enforced, before I am permitted to gamble again.

Signed (Excluded person)

Print Name

Date

.....

**This section to be completed by Count Me Out Member or designated, responsible person (see page 2):**

I am (name)..... and I am employed as a (job title) .....

for (company name) .....

At (time) ..... On (day) ..... (date) ..... (year) .....

I was working at (address) .....

..... Post code .....

when I was handed Count Me Out forms SE1, SE2, SE3 and two colour photographs by (name of person) .....

They showed me identification in the form of a (see overleaf for details) .....

I can confirm without any doubt that the person handing me this form and the form SE2 and SE3 is the person shown on the two photographs they have handed to me. I have printed 'I (your name) certify that this is a true likeness of (excluded persons name)' on the backs of these two colour photographs and signed and dated them.

Signed ..... Print name .....

Date ..... / ..... / ..... Contact telephone number including STD code .....

**COUNT ME OUT MEMBERS AND DESIGNATED PERSONS PLEASE FAX COMPLETED FORM TO 01502 531988.**

Please follow the instructions on page 2.

# 'Count Me Out' - ID Checking Process

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## Information for Persons wishing to Self Exclude

Having completed and signed forms SE1, SE2 and SE3 take them (3 copies of each if downloaded from internet), two recent colour photographs that show only you (passport photographs are recommended) and a form of photo ID to any 'Count Me Out' members premises or a designated, responsible person.

### What if I don't have any photo ID?

If you do not have any photo ID you must produce at least two forms of ID from the list\* below as well as two recent colour photographs of yourself.

### How do I know who is a 'Count Me Out' Member or a designated responsible person?

'Count Me Out' Members – A full upto date list of members can be found on the website [www.countmeout.org.uk](http://www.countmeout.org.uk) or alternatively member's premises will be displaying the 'Count Me Out' logo.

Designated/Responsible persons include: Counsellors, Doctors, Solicitors, Accountants, Police officers, social workers and any other professional person who is prepared to be a verify your forms and photographs, fax the forms to N.S.E.P. CIC and be contacted by N.S.E.P. staff in order to verify their identity.

### What happens once I hand my completed forms and photographs to either a 'Count Me Out' Member or designated person?

See § below.

## Information for Members and Responsible persons

As a 'Count Me Out' Member or designated, responsible person, you are entrusted to verify and confirm the true identity of a person wishing to self exclude from gaming premises. Validating the information provided by an applicant and ensuring the application form is fully completed before countersigning and returning it to N.S.E.P. CIC ensures the integrity of the National Self Exclusion Program and helps protect vulnerable people.

### How many documents do I need to see?

The applicant must produce at least two forms of ID from the following list along with two recent colour photographs of themselves. Please note no other persons must be in the picture.

#### \* What are valid forms of ID?

Birth Certificate, Vehicle Registration Document, P45/P60 Statement (UK), Mail Order Catalogue Statement, Bank/Building Society Statement, Utility Bill - electricity, gas, water, telephone – including mobile phone contract/bill, TV Licence, Addressed Payslip, Credit Card Statement, National Insurance Card (UK), Store Card Statement, NHS Card (UK), Mortgage Statement, Benefit Statement - e.g. Child Allowance, Pension, Insurance Certificate, Council Tax Statement (UK).

### Can the applicant produce photo ID such as a passport or driving licence?

Yes – This document will be enough along with two recent colour photographs of themselves. Please note no other persons must be in the picture.

### What do I do once I have verified the person wishing to self exclude is the same person in the photographs they have handed to me?

If you are certain the person handing you the forms SE1, SE2 and SE3 are the same as the person in the two photographs please countersign and print this statement on the rear of both photographs: 'I (print your name) certify that this is a true likeness of (Excluded persons name)' then sign and date the rear of the photographs.

### § What should I do once I have signed and certified the photographs and forms as being correct?

'Count Me Out' members – hand a copy of forms SE1, SE2 and SE3 to the excluded person. Fax forms SE1, SE2 and SE3 to N.S.E.P. CIC on 01502 531988 and then post preferably by recorded delivery the forms and one photograph to N.S.E.P. at the address below. Retain a copy of forms SE1, SE2 and SE3 and one photograph for your records as per company policy. For more information call 01502 576888 or visit [www.countmeout.org.uk](http://www.countmeout.org.uk)

Non Members/Responsible persons – Having signed the forms and photographs please fax a copy of SE1, SE2 and SE3 to N.S.E.P. CIC on 01502 531988 then hand all the documentation to the person wishing to self exclude so that they can retain a copy for themselves and post preferably by recorded delivery the remaining two copies of the forms and the two countersigned photographs to N.S.E.P. CIC at the address below. Alternatively having faxed the forms please feel free to hand one copy of SE1, SE2 and SE3 to the person wishing to self exclude and post the remaining forms and two photographs to N.S.E.P. CIC at the address below.

Please note the completed forms and countersigned photographs should be send to:

**Count Me Out**, Riverside Business Centre, Riverside Road, Lowestoft, Suffolk, NR33 0TQ

Tel: 01502 576888 Fax: 01502 531988 Email: [info@countmeout.org.uk](mailto:info@countmeout.org.uk)

For more information please visit [www.countmeout.org.uk](http://www.countmeout.org.uk)