

CAESARS SPORTS BOOK BY WILLIAM HILL US SELF-EXCLUSION FORM

I, the undersigned, request that Caesars Sports Book by William Hill acknowledges my election to exclude myself

from engaging in gaming activities at any and all William Hill locations, including betting kiosks, as well as activity on my William Hill Rewards Club Account and/or mobile wagering application as follows:

_____ I do not wish to have access to my Caesars Sports Book by William Hill mobile wagering application

____ I do not wish to be allowed to place in-person bets at Caesars Sports Book by William Hill locations

____ I do not wish to have access to my Caesars Sports Book by William Hill pre-paid debit card

____ I do not wish to receive any mail, electronic or otherwise, regarding Caesars Sports Book by William Hill

After my request of any of the above-noted exclusions and receipt of acknowledgement of the Self-Exclusion Form, if Caesars Sports Book by William Hill should vary from the limits I have imposed, I understand that I must immediately notify the Caesars Sports Book by William Hill Head of Responsible Gaming of this occurrence. This includes the ability to place bets via mobile app, at Caesars Sports Book by William Hill locations, including kiosks, and the receipt of any direct marketing or promotional gaming opportunity material, via either electronic or regular mail, after submitting my request to be excluded from such.

gaming opportunities or promotions

I fully understand and voluntarily impose the above-noted exclusions. I understand my obligation to inform Caesars Sports Book by William Hill of any incidents that exceed or vary from my above self-imposed exclusions. I acknowledge that for my request of self-exclusion to be truly effective, I must exercise self-restraint and should not ask any Caesars Sports Book by William Hill employees to provide me with any of the services or privileges which are the subject of this request. As such, I understand that Caesars Sports Book by William Hill shall endeavor to honor my request to self-exclude as described above. However, I understand and agree that Caesars Sports Book by William Hill does not assume any liability or responsibility for any failure to comply with this request.

I understand that my self-exclusion will be effective for the greater of (i) twelve (12) months, or (ii) as required by applicable law from the date of acknowledgement of enrollment unless a lifetime ban has been imposed. My self-exclusion terms will be based on my self-elected timing based on what is offered in the prevailing state. After the final date of my enrollment in the program, I may request reinstatement of my privileges, in writing, by completing a Reinstatement Form. Consideration of my request for reinstatement of privileges will occur no sooner than thirty (30) days from receipt of the properly completed and executed Reinstatement Form.

I acknowledge that the Caesars Sports Book by William Hill Responsible Gaming Program shall not in any way be construed as an agreement by Caesars Sports Book by William Hill to assume liability or responsibility for any patron's gaming activities. I understand that a patron's decision to gamble in person at any and all Caesars Sports Book by William Hill locations, including betting kiosks, as well as activity on the patron's Caesars Sports Book by William Hill Rewards Club Account and/or mobile wagering application remains solely that of the patron, notwithstanding any gambling problem of the patron or his enrollment in the Responsible Gaming Program.

By signing this form, I certify that the information provided is true and accurate. I am aware that my signature

below authorizes Caesars Sports Book by William Hill to prohibit my gaming activities and related player services and privileges, in accordance with this request, subject to applicable law. I am aware and agree that after I elect self-exclusion, I shall not be eligible to collect any winnings or recover any losses resulting from any gaming activity, in any form, with Caesars Sports Book by William Hill.

*A valid, governmen	t-issued form of photo identification m	ust be presented for in-person submissions.
Print First Name	Print Last Name	Home Address
City	State	Zip Code
Signature	Date	Social Security Number
William Hill Rewards	Club Account Number	
	must be notarized and sent to: William 8, ATTN: Head of Responsible Gaming.	Hill US, 6325 S. Rainbow Blvd., Suite 100, Las
State of	Country of	
before me and acknowledge voluntarily. Name of Notary Pub	day of	ecuted this document personally and (seal)
Signature of Notary		
OR OFFICE USE ONLY orward completed for	m to: Head of Responsible Gaming, Legal/C	Compliance Dept., Corporate Office
eceived By:	Date Received:	Date Sent to Compliance:
Лobile Account # (if a	applicable): C	ompliance Signature: