## Self-exclusion form or limitation of wagered amounts

Please fill-in the following informa	tion:	
First Name:		
Last Name:		
Sex:		
Address:		
City and Postal Code:		
ID document number and date of r	elease:	-
Date of birth:		
Personal Identification Number:		
Phone number:		
Email address:		
The form must be submitted along with a copy of Your ID document.		
1) I the Undersigned		
I declare that I have a self-control problem on withholding my impulses to gamble and I voluntarily request the Organizer, Casa Pariurilor, to block / restrict my access to remote betting		
(online). By signing this form I authorize the Organizer, Casa Pariurilor, to include me in the list of		
restricted and block / limit my access to the account during and / or on the amount:		
Period:	Betting Limit:	
1) days (maximum 7 days)	a) Daily limit in amount of:	
<ul><li>2) One month</li><li>3) Three months</li></ul>	b) Weekly limit in amount of: c) Monthly limit in amount of:	-
4) Six months	Losing Limit:	
5) One year	a) Daily limit in amount of:	
6) Five years	b) Weekly limit in amount of:	
7) Permanent	c) Monthly limit in amount of:	_
•	Deposit Limit:	
	a) Daily limit in amount of:	
	b) Weekly limit in amount of:	
	c) Monthly limit in amount of:	

Please select desired option.

## I certify that I understand and accept the terms and conditions concerning restrictions on the self-exclusion:

- This restriction applies only to remote gamble (online).
- I agree Organizer's employees to take all necessary measures to restrict access to my access to remote gambling (online).
- I take responsibility for inclusion in any remote gambling activity which is incompatible with these restrictions and conditions.
- I agree that no employee of the Organizer is responsible for my inconsistent actions with the terms and conditions of self-exclusion, and I take responsibility.
- I agree that neither the Organizer nor its employees are responsible for the losses or any consequences arising from failure to comply with the Terms and conditions.
- The Organizer and its employees shall not be liable for failure occurrence while implementing of the self-exclusion form or any possible consequences.
- I do not contradict this statement for any reason.
- I agree that the restrictions are irrevocable until the end of indicated.period.
- By signing this application from I allow my personal data to be used and stored in order to achieve and implement this demand and in case of legal demands from the authorities, after some offenses, these will be provided to authorized third parties.

Date:	
Place:	
	Signature:
	(First/Last Name )

<sup>\*</sup> The form will be sent to the Operator's address: Hattrick PSK d.o.o, Sv. Leopolda Mandi 14, Dugopolje, Croatia, in person in one of Casa Pariurilor's bet-shops or by e-mail at: <a href="mailto:suport@casapariurilor.ro">suport@casapariurilor.ro</a>.

<sup>\*\*</sup> Hattrick PSK d.o.o. will not use your data only for the purposes mentioned above and will not alienate them except if requested by the law. If any change of personal data occurs, the applicant must immediately inform the Organizer in order to facilitate the implementation process.