



Pokégnek Bodéwadmik
 POKAGON BAND OF POTAWATOMI
 GAMING COMMISSION

-POKAGON+BAND+OF+POTAWATOMI+INDIANS-
 POKAGON BAND GAMING COMMISSION

CASINO / iGAMING VOLUNTARY EXCLUSION REINSTATEMENT REQUEST

Any person completing their first (1st) Voluntary Exclusion must wait at least two (2) years before they may request Exclusion Reinstatement. Any second (2nd) or subsequent Voluntary Exclusion is for life and the person is not eligible for Exclusion Reinstatement.

FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: _____ PHONE NUMBER: _____

EMAIL ADDRESS: _____ (For Questions / Confirmation Information)

MAILING ADDRESS: _____ CITY: _____ STATE & ZIP: _____

MAILING ADDRESS AT TIME OF EXCLUSION (if different from above): N/A

MAILING ADDRESS: _____ CITY: _____ STATE & ZIP: _____

REINSTATEMENT TYPE: CASINO iGAMING BOTH

I, the undersigned individual, submit to the Pokagon Band Gaming Commission (“PBGC”) this *Voluntary Exclusion Reinstatement Request* seeking to have my name removed from the list(s) of excluded individuals indicated above. I understand submission of this Request does not constitute permission to enter onto any **Four Winds Casino** property or permit gaming online, and I can neither enter onto any such property or game with Four Winds unless and until I receive communication from the PBGC stating otherwise.

SIGNATURE: _____ **DATE:** _____

Please complete, sign, and submit this form via email, fax, or USPS to:

Email: GC.Investigators@PokagonBand-nsn.gov
Fax: (269) 926-5471
Address: Pokagon Band Gaming Commission
 ATTN: Reinstatements
 10528 Maudlin Rd
 New Buffalo, MI 49117

The Pokagon Band Gaming Commission maintains a Self-Exclusion program available to any person who would like to voluntarily exclude themselves from the **Four Winds Casino properties** located in Michigan and Indiana, and **Four Winds iGaming** available online. For more information on the Self-Exclusion program visit <http://www.pokagon.com/pokagonbandgamingcommission> or write to the address above.