




Santa Rosa Rancheria
Tribal Gaming Commission
17225 Jersey Ave Lemoore, CA, 93245
559.924.6948  <https://www.srrgc-nsn.gov/>

SANTA ROSA RANCHERIA TRIBAL GAMING COMMISSION

EXCLUSION REINSTATEMENT REQUEST

FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: _____ PHONE: () _____

EMAIL ADDRESS: _____ (To send confirmation email of Request submission)

MAILING ADDRESS: _____ CITY: _____ STATE, ZIP: _____

MAILING ADDRESS AT TIME OF EXCLUSION (if different from above): _____

HOUSE # & STREET: _____ CITY: _____ STATE, ZIP: _____



Reason:

Please complete, sign, and submit this form via e-mail (Exclusions Section on the website) or USPS: A copy of a Government Identification must be attached and notary section completed.

Address: Santa Rosa Rancheria Tribal Gaming Commission
ATTN: Exclusion Reinstatement
PO BOX 668
Lemoore, CA, 93245

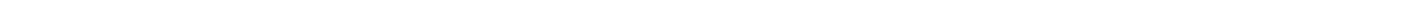
 Investigator@srrgc-nsn.gov

The Santa Rosa Rancheria Tribal Gaming Commission maintains a Self-Exclusion program available to any person who would like to voluntarily exclude themselves from the Tachi Palace Casino Resort properties.

I, the undersigned individual, submit to the Santa Rosa Rancheria Tribal Gaming Commission ("SRRTGC") this **Exclusion Reinstatement Request** seeking to have my name reinstated from the list of excluded individuals. I understand submission of this **Request does not constitute permission to enter onto any Tachi Palace Casino Resort property**, and I cannot enter onto any such property unless and until I receive communication from the "SRRTGC" stating otherwise. A decision will usually be issued in about (4) weeks. You will be **notified by mail** once it has been rendered.

SIGNATURE:

DATE:



.....

State of _____

County of _____

_____, the individual has personally appeared before me on the date indicated above and affirmed that he or she is the person whose signature appears above and that he or she has read and understands the request.

Subscribed and sworn to, or affirmed before me

this _____ day of _____, 20__.

Signed: _____

Printed Name: _____

My Commission Expires: _____

Reminder: Copy of badge photo for verification must be attached. Identification has been checked to ensure this is the person before me. _____ (Initials of Notary)



Santa Rosa Rancheria Gaming Commission

Approved on this _____ day of _____, 20__

Gaming Commission