

Casinò Admiral SA.	Online Social Concept	FO
	Application Form for the Lifting of the Gambling Exclusion	OL06_12

APPLICATION FOR THE LIFTING OF A GAMBLING EXCLUSION

pursuant to Art. 80 para. 1 lit. a, b BGS and Art. 80 para. 5 BGS

You can apply for the lifting of a voluntary exclusion after three months and any ordered exclusion at any time, if it is proven that the reasons for the exclusion no longer exist. The same procedure applies for both voluntary and ordered exclusions, which involves the examination of the documents listed below and a conversation with a professional organization.

Please send us the following documents and information:

- ☐ Completed and signed application for the lifting of the gambling exclusion
- ☐ Copy of valid personal ID (passport, ID, driver's license, foreigner's ID)
- ☐ Current debt collection register extract from the last 5 years (not older than 1 month)
- ☐ Bank account statements from the last 3 months, showing monthly fixed expenses (e.g., rent, insurance premiums, alimony payments, loan repayments, etc.). The balances must also be visible.
- ☐ For employees: Payslips from the last 3 months
- ☐ For self-employed persons and pensioners: Last tax assessment (not tax declaration)
- ☐ For pensioners: Pension statements from the last 3 months

Upon receiving all the documents, we will review your application and contact you regarding the next steps.

If the examination of the documents is positive, a cantonal recognized professional organization will be involved in the process through a conversation (Art. 81 BGS). Subsequently, the gambling provider will make a decision regarding the lifting of the exclusion.

If the decision is negative or if the applicant refuses to cooperate, the exclusion will remain in place.

If you have any questions, please feel free to contact us.

Thank you for your efforts and kind regards,

Your Online Casino ADMIRAL

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APPLICATION

Personal Information

Identity data	Contact details
Antragsteller ☐ M ☐ F	Street
Name, First Name	Postal Code / City
Date of Birth	Phone Number
Nationality	Email

☐ Copy / Scan Personal ID, Passport, ID, Driver's License or Foreigner's ID

Marital Status

☐ single ☐ married ☐ separated
☐ divorced ☐ widowed ☐ in a relationship

Living Situation

☐ Married couple / registered partnership living in the same household
☐ Partnership with separate household finances (e.g., sharing of rent costs)
☐ Other living situations (living alone, shared accommodation, etc.)

Children

Children (financially dependent): ☐ No ☐ Yes; Number _____ Age _____

Professional Situation

☐ employed ☐ self-employed Percentage: _____%

Occupation / Industry _____ Company: _____

☐ Dual-income household ☐ Student ☐ unemployed
☐ Housewife / -husband ☐ AHV-recipient ☐ IV-recipient
☐ welfare aid ☐ Supplementary benefits ☐ Other: _____

Finances (in CHF)

Net income per month _____

13th salary / bonus / gratuity, **net** _____

Net income of spouse per month _____

Other income per month ☐ No ☐ Yes _____

If yes, please describe income in detail _____

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Assets ☐ No ☐ Yes _____

If yes, please describe assets in detail _____

Other information

Housing Costs (in CHF)

Rent including utilities per month _____

Mortgage interest including utilities per month _____

Other monthly costs

Fixed Obligations (in CHF)

Alimony payments per month _____

Leasing costs per month _____

Loan repayments per month _____

Other monthly costs

The required documents will be submitted by the player:

☐ by mail ☐ by email (rg@admiral.ch)

☐ in person

Do you agree that we contact you by phone at the number provided on the form to schedule an appointment for the conversation with the professional organization?

☐ Yes ☐ No

Please note that you are not allowed to visit any casinos in Switzerland and Liechtenstein or play online until your application has been resolved.

Place, Date

Signature of Applicant

Attachments: listed evidence as per page 1