



HOLLYWOOD RACES WAGERING LIMITS CHANGE REQUEST FORM

I, the undersigned, hereby voluntarily request that the previously requested self-imposed wagering limits pursuant to 9 NYCRR Section 5403, for my HollywoodRaces.com account be updated based on the information contained in this document.

I understand this request for a change in my wagering limits is subject to review by HollywoodRaces.com and such requests will be put into effect within seven (7) days upon receipt and review by HollywoodRaces.com. A notification from HollywoodRaces.com will be sent to your attention verifying your request.

I understand that in making this request, should I continue to require wagering limitations on my account that such wagers must be placed through a telephone operator at HollywoodRaces.com.

I hereby release HollywoodRaces.com and its subsidiaries, affiliates and related entities and their respective shareholders, officers, directors, agents and employees for any and all damages, claims and liabilities, arising out of or relating in any way to (1) this wagering limit request and (2) the failure of the aforementioned corporations and/or their employees or agents to prevent me from exceeding these wagering limits.

Requested Change in Daily Wagering Limits: From \$ _____ to \$ _____

Requested Change in Weekly Wagering Limits: From \$ _____ to \$ _____

I would request to eliminate all Daily Wagering Limits currently placed on my account _____

I would request to eliminate all Weekly Wagering Limits currently placed on my account _____

Full Name:	Date of Birth:
Residential Address:	SSN:
City, State, Zip:	User Name:
Phone:	Account Number:

Signature: _____ **Date:** _____

This completed form should be mailed to:
HOLLYWOOD RACES
 Eight Tower Bridge
 161 Washington Street, Suite 1125
 Conshohocken, PA 19428
 Gambling problem? Call 1-800-GAMBLER for help