Reference: Compliance jackpots.ch
Haselstrasse 2, 5400 Baden
T +41 (0)56 552 10 60
risk@grandcasinobaden.ch

Information on the lifting of gambling suspension :

- Voluntary gambling suspension Art. 80 Abs. 5 BGS
- Gambling suspension Art. 80 Abs. 1 lit. a und b / Abs. 2 BGS

Dear guests,

For voluntary requested gambling suspension, it is possible to request the lifting of the suspension the earliest after 3 months. The same conditions for lifting the gambling suspension apply for both types of suspension (voluntary and ordered).
In the case of social security benefits **(unemployment benefits, social assistance and/or supplementary benefits)**, no lifting of the gambling suspension is possible.
Please send the following documents and information to the Social Concept Department by e-mail or via the contact form.
Please note that your application will only be processed if we are in possession of all the required documents.

- ☐ **Form for lifting the gambling suspension (see pages 2 -5)**
- ☐ **Current extract from the debt collection register covering the last 5 years (no current execution or loss certificate)**
- ☐ **Account statements for the last 3 months (with incoming and outgoing transactions, intermediate and final balances, no negative balance)**
- ☐ **For employees: Salary slips for the last 3 months**
- ☐ **In case of self-employed activity: last commercial balance sheet and commercial account statements for the last three months**

- ☐ **If available: Other accounts or assets**
- ☐ **If married: written consent of spouse (including telephone number)**
- ☐ **If dependent children: written permission from the other parent, also for unmarried couples (including telephone number)**
- ☐ **Living with his/her parents : written authorisation from one of the parents**

You can submit the documents by replying to this e-mail or send them by post to the following address:

Grand Casino Baden
z. Hd. v. Compliance jackpots.ch
Haselstrasse 2

5400 Baden

Your documents will be checked internally and then temporarily made available for consultation at the competent addiction counselling centre. As soon as we have received feedback from the addiction counselling service, we will be happy to contact you to inform you of the next steps.
If you have any further questions, please do not hesitate to contact us.

Kind regards,
Team Compliance jackpots.ch, Grand Casino Baden AG

Questionnaire for the lifting of the ban :

Name: _____ First name: _____ Date of birth:_____

Street/ nr. : _____ Postal code : _____

City : _____ Canton : _____

Phone : _____ E-mail: _____

Gambling suspension at Grand Casino Baden ☐ Or gambling suspension online at jackpots.ch ☐

Civil status: single ☐ married ☐ seperated ☐ divorced ☐ widowed ☐ concubinate ☐

Living situation :

Married couple / registered partnership ☐
Partnership with separate household budget (sharing of rental costs) ☐
Other living situations (single, shared flat, etc.) ☐

Children:

Dependent children up to 10 years: _____

Dependent children over 10 years: _____

Job-related situation :

☐ Employed ☐ Self-employed ☐ Unemployment

Profession/industry: _____
Company: _____

☐ Double earner ☐ Student ☐ Part-time job :
☐ Housewife/Househusband ☐ AHV recipient ☐ IV recipient ☐ Supplementary benefits
☐ Social assistance ☐ Other :

Finances:

Net monthly salary: _____

13th salary / Bonus / Net annual gratification: _____

Net monthly salary spouse: _____

Other monthly income: Yes: ☐ _____ No: ☐

If yes, please describe type of income: _____

Assets: CHF : Yes: ☐ _____ No: ☐

Living expenses:

Rent including additional costs per month: _____

Mortage including additional costs per month: _____

Fixed obligations :

Monthly alimony: _____

Leasing costs per month: _____

Loan repayments per month: _____

Gambling behaviour:

How often and how long per visit would you like to play per month?

Online casinos _____

Land-based casinos _____

What loss limit do you set yourself per month?

Online casinos _____

Land-based casinos _____

I confirm that I have applied in writing to Grand Casino Baden AG for the lifting of my gambling suspension and that I agree to the procedure for lifting my gambling suspension.
My data will be stored by Grand Casino Baden AG in accordance with the legal requirements and in compliance with data protection regulations.
I confirm that

- my declarations are truthful and complete.
  and
- the written documents I have submitted are complete and correct.

Place and date: _____ Signature: _____