

CUSTOMER PROFILE

Name: _____
(Please print clearly) Last Name, First, M.I. Spouse's Name/B-Day

Residence Address: _____
Street Address City State Zip

Hm. Phone: _____ Wk. Phone: _____ Fax: _____

Pg./Mb. Phone: _____ Bus. Type: _____

Business Name: _____ Title: _____

Business Address: _____
Street Address City State Zip

Mail to be received at: Business ___ or Residence ___ Email _____

Credit Card Type: _____ Credit Card #: _____ Exp.: _____

Date of Birth: _____ Social Security #: _____ Driver's License #: _____

I have established credit at the following Casinos:

- 1. _____ Limit: _____
- 2. _____ Limit: _____

Please establish my credit line for \$ _____ - Here is my bank information:
Must be a checking account

Bank #1 Name: _____ Branch: _____
Address: _____

Street Address City State Zip

Account No.(s): (1) _____ (2) _____

Bank Officer contact: _____ Position: _____

Phone: _____ Types of Account(s): Business ___ or Personal _____

Bank #2 Name: _____ Branch: _____

Address: _____

Street Address City State Zip

Account No.(s): (1) _____ (2) _____

Bank Officer contact: _____ Position: _____

Phone: _____ Types of Account(s): Business ___ or Personal _____

You have my permission to check with the above bank(s): _____

Date: _____ (signature as appears on checks)

Special Interests: Golf _____ Fishing _____ Hunting _____ Tennis _____ Boxing _____

Super Bowl _____ Concerts _____ Racing _____ Rodeo _____ New Year's Eve _____

Poker _____ Black Jack _____ Craps _____ Baccarat _____ Slots _____ Skiing _____

Sports Wagering: Football _____ Basketball _____ Baseball _____ Races _____

Referred by: _____