

Gun Lake Casino Win/Loss Statement Request

Name:
Passport Card Number:
Date of Birth:
Email Address:
Is this a change of address? YES NO (please circle)
Mailing Address:
City/State/Zip:
Telephone:

Please provide me with a statement of my gaming activity for the year: 2011 (Please Circle)

I do hereby certify that the statements contained herein are true and correct and I hereby authorize Gun Lake Casino, its Subsidiaries, Affiliates and Agents, to provide to me a win/loss statement of my gaming activity derived from the above referenced Account. I agree to indemnify and hold harmless Gun Lake Casino and its respective past and present agents, employees, managers, representatives, officers, directors, successors and affiliated persons, organizations and companies, from any and all suits, causes of action, liabilities, costs, losses, damages, attorney's fees and expenses which I, or my administrators, executors, agents, assignees or any third party may have arising out of or relating to this request as a result of this request.

Account Holder's Signature Is Required Below

In witness whereof, I have executed this request at _____, _____ State
City State

on the _____ day of _____, 20____. _____
Account Holder's Signature

If Account Holder does not present request in person, Account Holder's signature must be notarized. Only Account Holder may receive or request a Win Loss Statement. Account Holder MUST present valid Government issued photo ID acceptable to Gun Lake Casino in its sole and absolute discretion.

SUBSCRIBED AND SWORN TO before me

on the _____ day of _____, 20____.

 NOTARY PUBLIC

**Do Not Write In This Box
For Gun Lake Casino's Use Only**

Valid Government Issued	Insert Valid Government Issued Identification Type Verified	Verifier's Signature and Date
Notarized		
Photo Identification Valid Government Issued		
Date Received		
All Items Verified in Player Tracking		

Please present this request to the Rewards Center at Gun Lake Casino. If this request is not presented in person, request must be notarized. Please mail the original request to:

**Gun Lake Casino
 Win/Loss Statement Request
 1123 129th Ave
 Wayland, MI 49348**