



GAMING HISTORY REQUEST FORM

Mail

Pick Up

Amended Jun 1st, 2011

Patron Name: _____
First Name Middle Initial Last Name

Mailing Address: _____
Street

City State Zip code Country (USA or MEX)

Date of Birth: _____ **SSN:** - -
MM/DD/YY

Club Sycuan VIP Number:

Tax Year(s) Requested: 2011 2010 2009 2008 2007 Earlier Years:

To help us serve you better, the SSN and VIP number are necessary. Please fill out this form completely, correctly and clearly. All your information is confidential. If you want the Gaming History Statement to be mailed, please VERIFY your current mailing address. Address changes or corrections can be made at any Club Sycuan desk. To assist us in providing your Gaming History Statement in time for the current tax year, please submit your request before April 1st of the year following the current tax year.

I request that *Sycuan Casino* provide my historical gaming activity as specified above. In consideration for this information, I hereby release *Sycuan Casino* and all of their respective officers, directors, employees, and agents from any and all claims arising from or relating to the information and its release, and further agree to indemnify and hold those entities and persons harmless from any such claims. I understand that the information requested is generated from internal Sycuan Casino systems is not intended to be or take the place of my own records of my gaming activity. *Sycuan Casino* makes no representation or warranty, express or implied, as to the accuracy of this information or its effectiveness as proof of losses.

Patron Signature: _____ **Date:** _____

Contact Phone #: _____

Address verification completed by ClubRep: _____

Mail your Form to:	Sycuan Casino Club Sycuan 5485 Casino Way El Cajon, CA 92019	Or	Bring your completed form to any Club Sycuan desk	Or	Fax your completed Form to (619) 445-6752
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