

RESORTS
CASINO
TUNICA

WIN/LOSS REQUEST FORM

Your request will be completed within 14 business days from the date of receiving the completed written request. The *Win/Loss Statement* will be forwarded via mail or fax.

The *Win/Loss Statement* includes data from our records that reflect tracked gaming activity and combines tracked wins as well as tracked losses for the time period requested. *Win/Loss Statement* figures are determined with the assumption that patrons use their Resorts Destination Casino Club Card while playing. Tracking is an internal marketing tool for which the overall accuracy cannot be verified.

Name: _____

Address: _____

Date of Birth: _____

Phone#: _____ Fax#: _____

Destination Club Card#: _____

Year Requested: _____

Check One Option: Fax _____ Mail _____

Signature: _____ Date: _____

If you have any questions contact us at: 662 363-7777.

Fax To: 662 357-2488

Mail To: Resorts Casino Tunica
P. O. Box 215
Tunica Resorts, MS 38664

Gambling Problem? Call 1-888-777-9696