

Aliante Casino + Hotel + Spa Win/Loss Statement Request

Name:	Date Requested:		
Date of Birth:	Account Number:		
Email Address:	Delivery Method:	Mail	Email
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: 2014 2015 2016

I do hereby certify that the statements contained herein are true and correct and I hereby authorize Aliante Gaming, LLC, 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 Aliante Gaming LLC, and its members, managers, affiliates, successors, and assignees, including their respective, affiliates, officers, directors, employees and agents 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 _____

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 Aliante Gaming, LLC, in its sole and absolute discretion.

SUBSCRIBED AND SWORN TO before me

The _____ day of _____, 20____.

NOTARY PUBLIC

Do Not Write In This Box

For Aliante Casino + Hotel Use Only

Valid Government Issued Identification Type	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 Aliante Casino + Hotel. If this request is not presented in person, request must be notarized. Please mail the original request to:

**Aliante Gaming Marketing
Win/Loss Statement Request
7300 Aliante Parkway
North Las Vegas, Nevada 89084**