



Casino Credit Application

Thank you for your interest in Fitz Casino & Hotel. Once completed, please return this application to the casino cashier, either in person, by mail or by fax to: **Fitz Casino & Hotel, ATTN: Credit Department, PO Box 327, Tunica Resorts, MS 38664 - FAX 622-363-7161.** Please include a voided check and a copy of your driver's license, passport or active military ID. If you have any questions, or if we may be able to further assist you, please contact us at 1-662-363-5825 ext. 8377. If submitting this application in person, proceed to Casino Players, Club, located on the first floor of the casino - valid identification will be requested. Thank you.

<input type="checkbox"/> Credit <input type="checkbox"/> Front Money <input type="checkbox"/> Check Cashing			<input type="checkbox"/> Junket Rep		<input type="checkbox"/> Employee Received by _____	
Players Card#		Amount Requested			CCID#	
APPLICANT INFORMATION						
MR. MRS. MS.	Last Name		First Name		MI	SUFFIX
Date of Birth		SSN			AKA	
Residence Address						
City		State			Zip	
Years at Address	Send Mail to: <input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> None				Spouse Name	
Home Phone		Cell Phone		Passport #		
Driver's License#		Issuing State		Exp.	Email	
Have you ever Filed Bankruptcy <input type="checkbox"/> Yes <input type="checkbox"/> No				Have you ever had credit with Fitz Tunica? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, when? _____		
Name of Bank		Address			City, State	
ABA#		ACCT#			Type of Acct	
Comp, Acct, Title Contact					Other	
EMPLOYMENT INFORMATION						
<input type="checkbox"/> Retired	Sole proprietor <input type="checkbox"/> Yes <input type="checkbox"/> No			If No, Position with firm		Years with firm
Employment Firm				Type of Business		
Annual Income				Phone		
Business Address				City	State	Zip

I give permission to Majestic Mississippi, LLC dba Fitzgeralds Casino/ Hotel ("The Fitz") and affiliated entities to obtain and verify my information regarding my account with the banks listed above.

I certify that I have reviewed all of the information provided above and that it is true and accurate. I authorize Majestic Mississippi, LLC dba Fitzgeralds Casino/Hotel ("The Fitz") to conduct such investigations pertaining to the above information, as it deems necessary for the approval of my credit limit and to use such information as it deems necessary in connection with my request for credit. I am aware that I may be subject to civil and criminal liability if any material information provided by me is knowingly false.

I acknowledge that I am responsible for payment of credit issued and I waive any right, statutory or otherwise, to stop payment on any instruments issued in connections with any credit issued to me. I agree to pay interest at the maximum rate allowed by law on all past due balances. I agree to submit to the jurisdiction of any court, federal or state, in Mississippi should legal action be taken to collect any outstanding balance and agree to pay all cost of collection including attorney's fees. I hereby waive any defense to any such action based on lack of personal jurisdiction or improper venue.

GAMBLING PROBLEM, CALL 1-800-777-9696

SIGNATURE AS CHECKS WILL BE SIGNED