



## **Gaming History Win/Loss Request Form**

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**NOTE:** Fitz Casino & Hotel is unable to provide current year statements of play until the end of the year. Please complete this from unless it is a request for a previous year's statement of play.

**PLEASE PRINT**

Name: \_\_\_\_\_  

First Name
Middle Name
Last Name

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number: \_\_\_\_/\_\_\_\_/\_\_\_\_

Club Fitz Card Number: \_\_\_\_\_

Tax Year(s) Requested: \_\_\_\_\_

I am requesting that Majestic Mississippi, LLC (Fitz Casino & Hotel) provide my historical gaming activities for the year(s) listed above. I hereby release and hold harmless Fitz Casino & Hotel and its respective officers, directors, employees and agents from any and all claims arising from or relating to the release of the above information. Fitz Casino & Hotel makes no warranty or representation, express or implied, as to accuracy of the information or its effectiveness as proof win/loss. Valid photo identification must accompany this form. Forms received via fax must include a copy of a valid photo identification.

Player Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Mail or Fax Form to:**  
 Fitz Casino & Hotel  
 Attn: Casino Service Department  
 711 Lucky Lane  
 Tunica Resorts, MS 38664  
 Fax # 662-363-8251

Please allow two weeks for processing. Statements will be mailed to the address listed above.  
Must be 21. Gambling Problem? Call 1-800-522-4799