



Simply complete the information below to start the process today, and you will be on your way to enjoy the benefits of Casino Credit play!

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## FireKeepers Casino Credit Application

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(Last Name) (First Name) (Player #)

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Address City State Zip Code

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

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

Credit Limit Requested: \$ \_\_\_\_\_

Employer Name: \_\_\_\_\_ Years on Job \_\_\_\_\_ Monthly Income: \_\_\_\_\_

DOB: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Bank Name: \_\_\_\_\_ Acct #: \_\_\_\_\_

I certify that I have reviewed all of the information provided above and that it is true and accurate. I authorize the FireKeepers Development Authority and/or National Cred-A-Check (NCC) to conduct such investigations pertaining to the above information, as it deems necessary to verify credit information, obtain employment history and banking information, for the approval of my credit limit. All information will be held in the strictest confidence.

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Patron Signature

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Date