BAHA MAR CASINO WIN/LOSS STATEMENT REQUEST

Name:	
Date of Birth:	Club Blu Number:
Drivers License or Passport No:	
Email Address:	
Is this a change of address? YES NO (please circle)	
Mailing Address:	
City/State/Zip:	
Telephone:	Cell:

Please provide me with a statement of my gaming activity for the year: _____

Your Win/Loss Statement will include estimated Slot and Table Game win/loss information from Baha Mar Casino. The tracking system used in providing this information is based on the use of your Club Blu Account. This Win/Loss Statement does not include any uncarded play. Therefore, this Win/Loss Statement will not reflect an accurate accounting record—it merely provides an estimate you can use to compare to your records. The IRS and other government authorities recommends that you keep your own records of your gaming activity.

I do hereby certify that the information contained above is true and correct, and I authorize Baha Mar Casino to provide me a Win/Loss Statement of my Club Blu Account tracked gaming activity. In consideration of this, I agree to release and hold harmless Baha Mar Casino, and all of its directors, employees, officers, managers, affiliated persons, and representatives from any and all claims, causes of action, liabilities, costs, or damages arising from or relating to the information and its release as a result of this request. I further understand that the information requested is generated from a player's tracking system based on my Club Blu Account history and is not intended to be, or take place of, my own records of my gaming activity. Baha Mar Casino makes no representation or warranty, express or implied, as to the accuracy of this information or its effectiveness as proof of winnings and losses.

Baha Mar Club Blu Account Holder's Signature Is Required Below

In witness whereof, I have executed this request at_____, _____
City State/Province/Jurisdiction

On the_____ day of_____, 20_____, _____
Club Blu Account Holder's Signature

For security of your account, your Win/Loss Statement will be mailed to the address on file within 7 business days; please note that your Win/Loss Statement will not be emailed, faxed or provided to a change of address.

Do Not Write In This Box. For BAHA MAR Use Only		
Verified Validity of Government ID	**Yes**	**No**
Date Received		
All Items Verified in Player Tracking	**Yes**	**No**
Verifier's Signature & GB ID No.		

Please present this request to the Club Blu Rewards Desk at Baha Mar Casino. If not submitting in person, please mail or email the original request to along with a copy of your Driver's License, Passport or other Government Identification to:

BAHA MAR
CASINO FINANCE DEPARTMENT
WIN/LOSS STATEMENT REQUEST
ONE BAHA MAR BOULEVARD
NASSAU, BAHAMAS
EMAIL TO: Casinofinance@bahamar.com