



**Select options below:**

**W-2G** (For any jackpot winnings of \$1,200.00 or more.)

**Win/Loss** (For activity recorded when using your Players Club card.)

**Request for the year:**

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

**Players Club #:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Telephone Number:** ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

The IRS 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 Magic City Casino to provide me with Win/Loss and W-2G Form(s) of my gaming activity. In consideration of this, I agree to release and hold harmless Magic City 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.*

**Patron Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PLEASE NOTE: W-2G and Win/Loss requests will be processed and mailed or available for pick-up within 7-10 business days.**

**For Internal Office Use Only:**

**Date Requested:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_ Patron will pick up form(s) at the Players Club (Please bring your Photo ID).

\_\_\_\_ Email patron to: \_\_\_\_\_ @ \_\_\_\_\_ .

\_\_\_\_ Mail form(s) to the address on file.

**Employee Name:** \_\_\_\_\_

**Employee Signature:** \_\_\_\_\_

**Completed by:** \_\_\_\_\_ **Date:** \_\_\_\_\_