MOUNT AIRY
CASINO • RESORT • SPA

GAMING HISTORY REQUEST FORM

Please Print

Patron Name: _____

Date of Birth: _____ **Last 4 SS#:** _____

Phone #: _____

Player Club Card #: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

W2G/1042 are the forms given to you when you win a Jackpot Win/Loss Statement is your carded play for the entire year. 1099's will be sent out (only for promo wins totaling over $600/year) by the Casino after January 31st for the prior tax year.

Please mark one or both: **W2G/1042** _____ **Win/Loss** _____

Tax year requested: _____

Please Mark one: **Mailed:** _____ **Pick up @the Cage:** _____

I request that Mount Airy Casino Resort provide my historical gaming activity. I understand that the information requested is generated from an internal system and is not intended to be or take place of my own record of my gaming activity.

Patron Signature: _____ **Date:** _____

***Please allow 2 weeks for processing your request. Mailing of processed request forms will begin January of the following year. If no address is listed above, then it will be mailed to address on file. Please note: NO forms will be given to any individual other than the party listed on the W2G/1042-S, unless that person is deceased. In that case, a death certificate copy must be presented along with proof that you are the executor of the estate, the spouse of the deceased, or a beneficiary of an estate trust.*

312 WOODLAND ROAD · MT. POCONO, PA 18344
570-243-4800 /570-243-4892(FAX) · WWW.MOUNTAIRYCASINO.COM