MISSISSIPPI GAMING COMMISSION

REGULATION Rule 3.5 (d)

LISTED PATRON APPROVAL
PERSONAL INFORMATION

Patron Name	Date of application
Other names patron has used or been known by	Date of Birth
Social Security Number	Place of Birth
Home Address	Mailing Address
City State Zip	City State Zip
Home Phone	Business Phone
Driver License Number State Expiration Date	Previous Driver's Licenses From Other States
Current Employment	Employment Verified by Casino Yes No Initials

PATRON'S BOOK WAGERING ACTIVITY AND ALL WAGERING ACCOUNT NUMBERS

Account #	Activity (Date opened – Total handle during last 12 month period)

WHY DO YOU DESIRE TO HAVE THIS PERSON APPROVED AS A LISTED PATRON?

TO THE BEST OF YOUR KNOWLEDGE IS THIS PATRON INVOLVED IN ILLEGAL WAGERING ACTIVITY? YES_____NO _____

CASINO REPRESENTATIVE'S SIGNATURE

_____

TITLE _____ DATE_____

PHOTO