



DELAWARE PARK SLOT CREDIT DEPARTMENT
777 Delaware Park Boulevard
Wilmington, DE 19804
1-800-41-SLOTS | DelawarePark.com

PERSONAL INFORMATION

Name _____

Date of Birth *(DD/MM/YY)* _____

Social Security # _____ Credit Line Requested \$ _____

Delaware Park Player Rewards Card # _____

Home Address: Street _____

City _____ State _____ ZIP _____

Number of Years at Address *(If less than 3 years, please provide previous address)* _____

Previous Home Address: Street _____

City _____ State _____ ZIP _____

Home Phone # _____ Business Phone # _____

E-Mail Address _____ Cell Phone # _____

BANK INFORMATION *(Only personal accounts and sole proprietor business accounts are accepted.)*

Bank Name _____

Bank Address: Street _____

City _____ State _____ ZIP _____

Personal Checking Account # _____ Routing # _____

Business Checking Account # *(Sole Proprietor Only)* _____

Business Account Title _____

RELEASE AUTHORIZATION TO ALL BANKS, FINANCIAL INSTITUTIONS AND CREDIT AGENCIES

I authorize Delaware Racing Association to conduct an investigation into my credit worthiness and to furnish information concerning such credit record to credit reporting agencies who may properly receive this information. A copy of this certification will be as effective and valid as the original document.

Customer Signature

Date