

**PLEASE PRINT OUT THE CASINO RESERVATION REQUEST FORM
FAX COMPLETED RESERVATION REQUEST TO: 1-718-261-7366
ATT: WORLDWIDE CASINO ENTERPRISE LTD**

**WE WILL CONTACT YOU BACK WITHIN TWENTY FOUR HOURS
THANK YOU**

By checking here I certify I am over 21 years of age (required) Yes _____ No _____

RESERVATION REQUEST

Casino Hotel Requested _____

Name First _____
(required)

Name Last _____
(required)

Address: line 1 _____
(required)

Address: line 2 _____

City _____
(required)

State/Province _____
(required)

Zip/Postal Code _____
(required)

Telephone Number _____
(required)

E-mail _____

Birthday (Month/Day/Year) _____
(required by the casino)

Gender Male _____ Female _____

Are you presently a rated casino player? Yes _____ No _____

Name the Casinos that you have most recently played in:

Arrival Date _____

Departure Date _____

Estimated Time of Arrival _____

Number of Guests _____

Number of Rooms _____

Room Type Requested: King _____ Double _____ Suite _____

Smoking _____ Non-Smoking _____

ADDITIONAL GUEST INFORMATION

Player 2:

First/Last Name _____

(required)

Date of Birth _____

(required)

Address (Required if different than above) _____

Player 3:

First/Last Name _____

(required)

Date of Birth _____

(required)

Address (Required if different than above) _____

Player 4:

First/Last Name _____

(required)

Date of Birth _____

(required)

Address (Required if different than above) _____

Do any Guests need Casino Credit? No _____ Yes _____

My Casino Interests Are:
(Please check all that apply)

Table Games

Table Games Tournaments

Slot Machines

Slot Tournaments

Casino Gift Promotions

Sporting Events

Golf

Fishing

Skiing

Entertainment Events

Other _____

Additional Comments or Requests _____
