



CASINO CREDIT APPLICATION

Date	ACCT #
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PERSONAL INFORMATION:

Last	First	Middle	DOB mm/dd/yyyy
Home Phone (xxx) xxx-xxxx	Cell Phone (xxx) xxx-xxxx	SSN xxx-xx-xxxx	
Drivers Licence #	Expiration Date	Email Address	
Residence Address			
Residence City	Residence State	Residence Zip	
Employer Name	Position	Length of Employment	
Employer Address	Employer Phone (xxx) xxx-xxxx		
City	State	Zip	
Expected Arrival Date	Amount of Limit Requested (7 day)		

PREFERRED MAIL: HOME BUSINESS

BANK INFORMATION: * ATTACH A VOIDED BANK CHECK

Bank Name #1	Account Number	ABA #	
Branch Address	City	State	Zip
Bank Name #2	Account Number	ABA#	
Branch Address	City	State	Zip

Warning: For the purposes of Nevada Law, a credit instrument is identical to a personal check and may be deposited in or presented for payment to a bank or other financial institution on which the credit instrument is drawn. Willfully drawing or passing a credit instrument with the intent to defraud, including knowing that there are insufficient funds in an account upon which it may be drawn, is a crime in the State of Nevada which may result in criminal prosecution in addition to civil proceedings to collect outstanding debt.

I wish to establish casino credit with the Nugget. You are hereby authorized to furnish the necessary information regarding my personal and/or business accounts. I certify that I have reviewed the information and that it is true and accurate. I authorize the Nugget and its affiliates to conduct such investigations pertaining to this information as it deems necessary for approval of my credit line. I agree not to hold any of these entities responsible or liable for the information released. I agree that Nevada law exclusively governs the terms of my credit line, advances or credit instruments. I agree that the Nugget may litigate any dispute involving the credit line, the debt or the payee and submit it to the exclusive jurisdiction of any court, state or federal in Nevada. In addition to any amounts authorized by law, I agree to pay interest on any balance at the rate of 1 percent per month from the date of execution and all costs of collection including the payee's attorney's fees and court costs. I acknowledge that irrespective of any currency exchange laws in the country in which I reside, I have the ability and intent to legally repay any advance of money by the Nugget. I also acknowledge that an independent agent collecting front money deposits or payments on the debt is my agent and not an agent for the Nugget and its affiliates.

Before drawing on my line of credit. If granted, I agree to sign credit instruments (e.g. checks) in the amount of the draw. I authorize the Nugget to complete any of the missing items of these credit instruments including the name of a payee, any missing amounts, a date, the name, account number and/or branch of any banks or financial institutions. This information can be for any account from which I now or may have in the future the right to withdraw funds, regardless whether that account now exists and whether I provided the information to the Nugget.

Casino play will be tracked. Credit limit may be reduced or suspended, based on the level of tracked play, without notice.

Signature of Applicant <i>X</i>	Date
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Either print the form out and send it in via mail or email to the credit department: SPA-credit@marnellgaming.com
 Nugget CasinoResort - 1100 Nugget Avenue, Sparks, NV 89431 775.356.3300 800.843.2427