



SOUTHWIND CASINO

Guest Win/Loss Statement 2010

Customer First/Last Name _____

Telephone Number _____

Street Address _____

City, State, Zip Code _____

Social Security Number _____

Drivers License Number _____ Player's Club Number _____

I request that SouthWind Casino provide me with a win/loss statement from its Newkirk, Oklahoma property. In consideration for this information, I hereby release The Kaw Nation, SouthWind Casino and their affiliated companies, and all of their respective owners, officers, directors, managers, members, employees, representatives and agents from any and all claims arising from or relating to the information and its release, and further agree to indemnify and hold those entities and persons harmless from any such claims. I understand that the information requested is generated from internal marketing records and is not intended to be or take the place of my own records of gaming activity. Furthermore, I voluntarily consent to the jurisdiction of the Kaw Nation.

SouthWind Casino makes no representation or warranty, express or implied, as to the accuracy of this information or its effectiveness as proof of losses. This is not a valid tax document. It is for information purposes only.

Guests Signature

Date

Please present form and ID to the Player's Club at:

SouthWind Casino
5640 North LA Cann
Newkirk, OK 74647

Processed by:

Players Club Employee

ID Number

Date