



**GAMING HISTORY REQUEST FORM**

Tax Year Requested \_\_\_\_\_

The Current Tax Year Win/Loss Statements are not available until after the end of the calendar year.

Patron Name: \_\_\_\_\_

First Name

Middle Initial

Last Name

Date of Birth: \_\_\_\_\_

Rush Rewards Players Club # \_\_\_\_\_

Please read and sign below. Your request cannot be processed without your signature.

I request that Rivers Casino & Resort Schenectady provide my historical gaming activity. In consideration for this information, I hereby release Rivers Casino Schenectady and its parent and affiliated companies, and all of their respective officers, directors, employees, 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 systems and is not intended to be or take the place of my own records of my gaming activity. Rivers Casino & Resort Schenectady makes no representation or warranty, express or implied, as to the accuracy of this information or its effectiveness as proof of losses.

Patron Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Your Gaming History Statement will be mailed to your address on file. Please verify that we have your current mailing address before submitting your request. If you need to change the address that we have on file, please visit us at Rush Rewards with your valid photo ID.

Please allow up to 4 weeks for processing.

**Email to:**  
WinLoss@riverscasinoandresort.com

**In Person:**  
Drop off at Rush Rewards

**Mail to:**  
Rivers Casino & Resort  
Win Loss Request  
1 Rush Street  
Schenectady, NY 12305

If you have questions regarding your win/loss statement, please call 518-579-8811.