

Date Mailed:

## Request for Player's Club W-2G / 1042-S Request Form

Please complete this form in its entirety, sign and date, and include a picture of yourself while holding your valid photo ID.

Mail <u>both</u> documents to this address: New Hampshire Group, LLC Attn: Finance Department 887B Central Ave Dover, NH 03820

	uested (mark all that apply): □ 2024					
<b>Property Lo</b> □ Dover	cation(s) (mark all that appl ☐ Keene	y): □ Lebanon		Manchester		
	2-S requests are only delive to ID is REQUIRED with your	•		-	•	
	<b>DRMATION:</b> ne:					
Rebel Reder	mption Player's Card #					
Address:						
City:		State:		Zip:		
Phone: (	)					
Hampshire Gro effectiveness o providing this claims arising	New Hampshire Group, LLC providence oup, LLC makes no representation as proof of losses nor is it intended information, I release New Hamps from or relating to the information less from any such claim.	of warranty, expres to take the place o hire Group, LLC and	s or imp f my ow I its affil	olied, as to the accuracy of t n records of gaming activit iated persons and compani	this information or its y. In consideration of ies from any and all	
Signature: _			Date:			
			ake 4-0	5 weeks to process.	7	
	Team Member Use Onl	•	h Nimme -			
	Players Account#:	Las	t ivame	i		
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	vermeu nv.	BAC BAC	PETT.			

OR Date Picked Up: \_