HOLLYWOOD Casino®

AT CHARLES TOWN RACES

CASINO CREDIT FACT SHEET

Thank you for choosing Hollywood Casino as your destination for fun and excitement. We are confident that you will enjoy the convenience and benefits your credit line offers. At Hollywood Casino our intention is to provide you with the best possible service. With this in mind, we would like to point out some important facts about your credit account:

REPAYMENT PERIOD

As a convenience to our customers, we hold credit instruments ("markers") interest-free for a pre-determined maximum period of time as follows:

Marker Amount	***Maximum Time***
$1,000 or less	7 days
$1,001 to $5,000	14 days
$5,001 and up	30 days

Hollywood Casino reserves the right to deposit markers at any time prior to the Maximum Time set forth, without notice.

MARKER CONSOLIDATION

We allow our customers to "consolidate" two or more smaller markers into one larger marker to extend the repayment/ redemption period. This is **not** automatic. The account holder must go to the Hollywood Cage and request the consolidation.

Example:

If you take two (2) separate markers of $800 each, one issued on August 1st and one issued on August 2nd, you would have seven (7) days from each respective issuance date to repay/redeem or the markers will be sent for deposit. However, if you elect to consolidate those markers, you would create one marker of $1,600 and have fourteen(14) days from August 1st to repay/ redeem the marker before it is sent for deposit.

RULES OF CREDIT USAGE

1. The issuance of casino credit is solely for gaming purposes at Hollywood Casino;
2. All your play must be rated on the gaming floor by use of your player's card;
3. In the event you win, you must repay your markers prior to departing the casino;
4. In the event you lose less than the entire amount of the marker(s), you must repay this remaining amount in your possession prior to the departing the casino and
5. Since all your gaming play must be rated, casino credit is not available for use in the poker room.

REPAYMENT PROCESS

Markers can be paid at any time within the repayment period. Payments can be made by cash, chips, bank draft, or personal check. If the marker is not paid by the expiration of the maximum hold period, it is deposited (like a check) and the funds are collected from your financial institution. All markers set for deposit are subject to a clearing time period determined by Hollywood Casino; during this time your account may not be available.

PERSONAL CHECK PAYMENTS

If you choose to write a personal check to pay/redeem a marker(s), the check must be drawn on the account disclosed in your credit application. When a check payment is received, the check will be deposited the next banking day.

PRIVACY DISCLOSURE

Hollywood Casino restricts access to personal information collected from our customers to those individuals who need to know the information in order to process credit applications or provide other services. We maintain physical, electronic, and procedural controls to safeguard non public personal information.

I have read and acknowledge receipt of this Casino Credit Fact Sheet:

Patron Signature: _____ Date: _____

ORIGINAL: CREDIT YELLOW: CUSTOMER

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Authorization

CONFIDENTIAL CREDIT INQUIRY

Bank Name: _____

Bank Address: _____ Phone: _____

Account Holder Name: _____

Account Holder Address: _____

In order to establish and maintain credit with Hollywood Casino, I authorize the release of the following information by you to Hollywood Casino and/or the presenting credit reporting agancy. A facsimile of this shall be acceptable authorization.

This information is required by the West Virginia Gaming Authority and will be held in the strictest confidence. A facsimile of this authorization shall be acceptable and considered as valid and effective as the original. The required information is listed below:

Customer Signature as on Checks: _____

Dated: _____

Branch ABA Number: _____

Checking Account Number: _____

Date the Account was Opened: _____

Current Balance as of Today: _____

Average Balance if available: _____

Account Type: ❒ Personal

Can Sign Checks alone: ❒ Yes ❒ No

Satisfactory Account: ❒ Yes ❒ No

Address same as above: ❒ Yes ❒ No

Comments: _____

Bank Representative Name _____ Title: _____

Please Print *First* *Last*

Upon completion, please fax the completed form to 304-724-4256. Thank you.

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AT CHARLES TOWN RACES

CREDIT APPLICATION

PLAYER ACCT:_____

LIMIT REQUEST_____

Executive Signature: _____ Date_____ Time _____ AM or PM
(Individual recording credit information)

NAME: LAST	FIRST	M.I.	BANK #1	ABA#
HOME ADDRESS	HOME PHONE		BRANCH	PERSONAL ACCT.#
CITY	STATE	ZIP	STREET ADDRESS	SOLE PROPRIETOR #
# YRS. AT RESIDENCE	CELL PHONE		CITY	STATE ZIP
SOCIAL SECURITY NO.	DATE OF BIRTH		BANK PHONE NO.	BANK OFFICER AND POSITION
EMPLOYMENT NAME OF FIRM (NOTE RETIRED)	SOLE PROPRIETOR Yes or No		BANK #2	ABA#
TYPE OF BUSINESS	POSITION	BUSINESS PHONE #	BRANCH	PERSONAL ACCT.#
EMPLOYMENT STREET ADDRESS			STREET ADDRESS	SOLE PROPRIETOR #
# YEARS CURRENT BUSINESS	ANNUAL EARNINGS*		CITY	STATE ZIP
EMAIL ADDRESS:	MAIL: HOME BUSINESS NO MAIL		BANK PHONE NO,	BANK OFFICER AND POSITION
DRIVERS LICENSE NUMBER AND STATE	EXPIRATION		BANK #3	ABA #
PASSPORT NUMBER	COUNTRY		BRANCH	PERSONAL ACCT.#
OTHER ID PRESENTED: FEDERAL STATE MILITARY			STREET ADDRESS	SOLE PROPRIETOR #
			CITY	STATE ZIP
OTHER CASINO LIMITS AT TIME OF CREDIT REQUEST			BANK PHONE NO.	BANK OFFICER AND POSITION
CASINO	LIMIT			
CASINO	LIMIT			
CASINO	LIMIT		SIGNATURE OF CLERK	TIME
CASINO	LIMIT			DATE

*Income from alimony, child support or separate maintenance payments need not be revealed if you do not wish to have it considered as a basis for repayment of the requested credit.

I have completed this application for casino credit and agree that this credit line will be used solely for gaming purposes at Hollywood Casino at Charles Town Races ("Hollywood Casino"). I certify that I have reviewed all of the information provided above and that is true and accurate. I will advise Hollywood Casino if any of this information changes. I understand that this application is required to be completed by regulations of the West Virginia Lottery Commission and that I may be subject to civil and criminal liability if any information provided by me is willfully false.

I authorize Hollywood Casino to conduct such investigations to verify the information provided and to obtain such credit information relating to me that it considers necessary to approve and thereafter maintain this credit line. I understand and agree that Hollywood Casino may disclose credit information concerning my credit record to credit reporting agencies and others.

I understand that I am responsible for the repayment of credit extended to me. The instruments issued as a result of this credit line are intended solely to provide an additional remedy to Hollywood Casino, and the obligations evidenced by such instruments are governed by the laws of the State of West Virginia. I waive any right, statutory or otherwise, to stop payment on any instrument issued in connection to any credit extended to me. Hollywood casino may, in its discretion, litigate any dispute arising out of this credit line before any Court having jurisdiction over me. I consent to the jurisdiction of any court, federal or state, in West Virginia. I waive any defense based on lack of personal jurisdiction or improper venue. Should legal action be taken to collect an outstanding balance, I agree to pay all costs of collection, including reasonable attorneys' fees.

I hereby expressly authorize Hollywood Casino to apply any and all gaming chips I may redeem, first to the payment/ reduction of any outstanding credit balance, with the excess, if any, to be returned to me.

SIGNATURE OF CUSTOMER

SIGNATURE:_____ DATE:_____