

**HOLLYWOOD**  
*Casino*

AT CHARLES TOWN RACES

MYCHOICE REGISTRATION FORM

Must be legible

Date of Visit \_\_\_\_\_

**To be completed by existing Mychoice Members**

Account # \_\_\_\_\_ Full Name \_\_\_\_\_

**To be completed by New Mychoice Members**

Full Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State & Zip \_\_\_\_\_

DOB (MM/DD/YY) \_\_\_\_\_ Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Signature \_\_\_\_\_

**To be completed by Marketing Representative**

Group Code \_\_\_\_\_ FSP/Pin Assigned By \_\_\_\_\_

Temp Card # \_\_\_\_\_ Account Updated By \_\_\_\_\_

ID Verified By \_\_\_\_\_

This form is the property of Hollywood Casino at Charles Town Races and cannot be used for any other purpose without the written approval from Hollywood Casino. Gamble Too Much? For Free confidential help call 1-800-Gambler.

**Must be 21 and have valid ID**

750 Hollywood Drive, Charles Town WV 25424 (800)795-7001 [www.hollywoodcasinoharlestown.com](http://www.hollywoodcasinoharlestown.com)