



CREDIT QUESTIONNAIRE

Thank you for your interest. Please fill in the following information so that we may process your request. One form of valid identification (i.e. Drivers License, Passport or Military ID) will be required to activate your credit line. We look forward to your next visit.

PERSONAL INFORMATION

Credit Limit Requested \$ _____ Rewards Account Number _____
Name (Last) _____ (First) _____ (MI) _____
Address _____ # Years _____
City _____ State _____ Country _____ Zip Code _____
Phone # _____ Email Address _____
Social Security # _____ Date of Birth _____
Gender () Male () Female Mother's Maiden Name _____
Expected Date of Arrival _____

BUSINESS INFORMATION

Business Name _____ Type of Business _____
Address _____
City _____ State _____ Country _____ Zip Code _____
Position with Business _____ Sole Proprietor [] Yes [] No
Business Phone # _____ Send My Mail To [] My Home [] My Business [] None

BANK ACCOUNT INFORMATION

(only personal checking accounts or sole proprietor business accounts will be accepted)

Bank #1 _____	Bank #2 _____
Routing # _____	Routing # _____
Account # _____	Account # _____
Address _____	Address _____
City _____	City _____
State _____ Zip _____	State _____ Zip _____
Personal [] Sole Proprietor []	Personal [] Sole Proprietor []

RELEASE AUTHORIZATION TO ALL FINANCIAL INSTITUTIONS/CREDIT REPORTING AGENCIES
I certify that I have reviewed all of the information provided above and that it is true and accurate. I authorize The Greenbrier to conduct such investigations pertaining to the above information as it deems necessary for approval of my credit limit.

Customer Signature _____ Date _____

Please submit completed form to:

Email: casinocredit@greenbrier.com | Fax: 304-536-7858

Mail: The Greenbrier, attn: Casino Club Credit Office, 300 West Main Street, White Sulphur Springs, WV 24986