

Account Verification Form.

Personal information

Full Name: _____

Address: _____

City: _____ State: _____

ZIP Code: _____ Date of Birth: _____

Day Phone: _____ Evening Phone: _____

Credit / Debit Card Details

CARD NUMBER												EXPIRY DATE (MM/YYYY)								
						X	X	X	X	X	X					/				
						X	X	X	X	X	X					/				

Legal Statement

I certify that the electronic media record of my transaction held by the EMONEY PROCESSING LTD. shall be used as the final determination to resolve any dispute I may have. I acknowledge that I have read all the information contained in the EMONEY PROCESSING LTD License and agree to abide by all the rules, terms, conditions and agreements therein and as may be amended from time to time.

I also certify that the credit cards listed above have been registered with the EMONEY PROCESSING LTD and used there with my full knowledge and consent.

Signature _____

Date _____

Return this completed and signed form to us along with a visible copy of your driver's license or other form of official photo I.D. as well as a copy of each credit card used and a utility bill or bank statement with your printed address on.

We will accept these documents by fax or you can also take a digital photograph or scan them and email them to us.

Email: accounting@planet7casino.com

In you have any questions or concerns regarding how your credit card billing will appear, please feel free to send us an email or contact us to our Customer Service Live Help.

Make an imprint of your embossed credit card

1. Place card under the authorization form
2. Rub pencil very light over the card
3. Ensure that name, number, and expiration date are clear and readable.

Use any of our US Toll Free Fax number:
1-888-402-2065 or 1-866-725-1109