

## Tour Operator Application (Print legibly please)

Company Name					
Tour Operator's Name					
Business Address					
City		State		Zip	
Business Phone		Busines	ss Fax		
Cell Phone		Alterna	Alternate Phone		
Email					
Company website address	www.				
Please list the Name(s) (if you require more room,				•	
Are you interested in b	oringing in groups	s for: □ Casi	ino Packa	ges □ B	ingo □ Both
EIN (Employee Identification	ation Number)			_	
Number of Years in Bu	siness				
Business Organization	ı: 🗆 Individual 🗆 Pa	artnership 🗆	Corporati	on, Stat	te of
List Owners/Principals	(Please list Tour Ope	rators Info)			
Please list below the Ow	ners/Principals of y	your compar	ny:		
			<del></del>		

Potawatomi Bingo Casino, Bus Programs/Tour & Travel Department 1721 W Canal St, Milwuakee, WI 53233 (414) 847-7910 Fax: (414) 847-7915 TourAndTravel@paysbig.com

Is you					
If yes	_				
Do yo					
If yes, who is your insurance carrier?					
Expiration date: Amount of coverage:					
Busi	ness References (Please List up to Three Casinos / businesses you current	ly work with)			
Name_	F	Phone			
Name_	F	Phone			
Name_	F	Phone			
	Please answer all of the following que	stions.			
1.	Has Applicant ever filed for Bankruptcy or become insolv	ent?	□ Yes	□No	
2.	Is Applicant presently the party to any lawsuit?		□ Yes	□No	
3.	Has Applicant, Coordinators or Host/Hostesses ever bee permanently or temporarily from a casino?	n banned,	□ Yes	□ No	
4.	Has Applicant or Coordinators ever been convicted of a f	elony?	□ Yes	□No	
5.	Have you ever had a Civil Judgment filed against you? If yes, was it satisfied?		□ Yes	□No	
6.	Have you ever applied to be a Registered Tour Operator Bingo Casino? If Yes, When	at Potawa	tomi □ Yes	□No	
	u answered yes to any of the questions above, please provide a ate piece of paper.)	an explanati	on on a		
	se list the names and addresses of your pick-uessary, use a separate piece of paper)	up points	<b>i</b>		

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This application must be completed in its entirety prior to being considered by the Bus Programs/Tour & Travel Department of Potawatomi Bingo Casino. Once the **complete** application has been received, along with an **original** W-9 form *Request for Taxpayer Identification Number and Certification*, it will take approximately three-four weeks to process. Incomplete applications will be returned to the Tour Operator for completion.

A member of the Bus Programs/Tour & Travel Department will notify you immediately of approval/denial. It is Potawatomi Bingo Casino policy not to inform applicant a reason if they are denied. Denied applicants may reapply after one year.

An internal department conducts a complete background check on applicant.

<b>CERTIFICATION:</b> APPLICANT CERTIFIES THE ABOVE INFORMATION TO BE TRUE AND CORRECT. APPLICANT UNDERSTANDS THAT THE MISREPRESENTATION OR OMISSIONS OF FACTS IS CAUSE FOR REJECTION OF THIS APPLICATION AND REVOCATION OF MY PRIVILEGES TO PARTICIPATE AS A TOUR OPERATOR.
Signature
Date

## **Attachment:**

- **W-9** (www.irs.gov/pub/irs-pdf/fm9.pdf)
  - The <u>original</u> must be returned to the Casino along with this complete application.

Please note, if you qualify for the Quarterly incentives your check will be written to the name of your Tour Group as indicated on this Application and Tour Operator contract, not the Tour Operator's name.

For office use only		
Application & W9 received on (date)		
Passed or Failed Background Investigation on (date)		
Reviewed by Supervisor and/or Manager on (date of the latest terms of the lates		
Accept or Deny Tour Operator Status (date)		

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