

JOIN PREMIER REWARDS

COMPLETE THIS APPLICATION AND SUBMIT WITH A VALID AUSTRALIAN DRIVERS LICENCE,
PASSPORT OR PROOF OF AGE CARD.

PERSONAL DETAILS

MR MRS MISS MS OTHER

FIRST NAME

SURNAME

PREFERRED NAME

MALE / FEMALE

DATE OF BIRTH

PREFERRED LANGUAGE (OTHER THAN ENGLISH):

OCCUPATION:

CONTACT DETAILS

POSTAL ADDRESS:

SUBURB:

STATE:

COUNTRY:

POST CODE:

HOME PHONE:

MOBILE:

EMAIL:

PREFERRED CONTACT METHODS:

EMAIL MAIL SMS/TEXT

INTERESTS *(SELECT ALL THAT APPLY)*

BARS KENO POKIES TABLE GAMES RESTAURANTS SPA EVENTS SPORTS

DECLARATION

- BY SIGNING BELOW, I DECLARE THAT I AM AT LEAST 18 YEARS OF AGE OR OLDER AND THAT ALL REPRESENTATIONS MADE BY ME ON THIS APPLICATION ARE TRUE AND CORRECT.
- I HAVE RECEIVED A COPY OF SKYCITY DARWIN'S PREMIER REWARDS PROGRAM TERMS AND CONDITIONS AND UNDERSTAND THAT THEY ARE AVAILABLE ONLINE AT WWW.SKYCITYDARWIN.COM.AU
- BY SIGNING UP TO THE SKYCITY PREMIER REWARDS PROGRAM, I AGREE TO BE CONTACTED BY SKYCITY USING THE INFORMATION ON THIS APPLICATION FORM.
- I AM AWARE THAT GAMBLING AT SKYCITY IS A FORM OF FUN AND ENTERTAINMENT, NOT A STRATEGY FOR FINANCIAL SUCCESS AND THAT FREE INFORMATION AND ADVICE IS AVAILABLE FROM AMITY COMMUNITY SERVICES WWW.AMITY.ORG.AU

SIGNATURE

DATE

/ /

OFFICE USE ONLY

PREMIER REWARDS ACCOUNT NUMBER

CUSTOMER ID TYPE

CUSTOMER ID NO

CUSTOMER ID EXPIRY DATE

HOST ID

ENROLMENT DATE

