



Join the  
**Golden Buffalo  
Players Club**

and receive  
300 points and a free gift.  
*(new members only)*

Please allow 24 hours for points to be added to your card.

*Please enroll me as a member of the  
Golden Buffalo Casino Players Card Program.*

\_\_\_\_\_  
First Name      Middle Initial      Last Name

\_\_\_\_\_  
Mailing Address      City      State      Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Birthday                                      Anniversary

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

**For Office Use Only:**

Date of Issue: \_\_\_\_\_ Card No.: \_\_\_\_\_