

CRAZYWINNERS CASINO

Email _documents@crazywinners.com

For any additional support, please contact us on live chat

Dear

*If you deposit with a credit card please fill up the below form and provide the copy of the credit card used in the casino.

*If you deposit with an alternative method please provide the identity verification documents only (ID and UB).

By submitting this form (hand written signed and dated), along with the additional information requested, I am authorizing and fully acknowledging the following:

1. I am the authorized cardholder and will honor all purchases initiated by me to my account with the below Credit/Debit Card, whether completed by telephone or Internet.
2. I am of age of majority (18 years or older depending on my jurisdiction).
3. I have read and accepted the terms of use as listed elsewhere on this website.

Full Name: _____

Phone Number: (____) - ____ - _____

Card Type: Visa Master Card AMEX

Credit Card Number: ____ - XXXX - XXXX - ____

Card Expiration Date: __ / __ (Month/Year)

**If using more than 1 credit card, please submit an additional authorization form for each card used.*

Along with this Authorization form, please enclose the following documents:



A copy of valid picture ID (Driver's license "front&back" or passport)



A copy of the Credit Card listed above (front and back showing the first 6 and last 4 digits)



A copy of recent utility bill confirming your home address

I hereby authorize the above as evidenced by my signature below.

today's date _____ Signed _____