



## Activity and Winner's Edge Casino Reports Portal Request Form

To request access to the Casino Portal website for specific reports noted below, please complete the form and email to the Senior Manager, Customer & Market Insights [Jeffrey.konowalchik@aglc.ca](mailto:Jeffrey.konowalchik@aglc.ca) and cc [Winnersedge@aglc.ca](mailto:Winnersedge@aglc.ca).

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1. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Select the Role(s):

- Casino Activity Reports
  - Contains weekly Cash Played reports for your casino and others; monthly per-slot performance reports for your casino
  - Recommended for those who look at financials, perform analysis for your casino
- Casino Winner's Edge
  - Contains bi-weekly Winner's Edge summary reports for your casino; monthly lists of players who played at your casino; monthly lists of players who won handpay jackpots on slot machines at your casino
  - Recommended for those who work in marketing and higher-level members of the organization
  - Contains detailed personal identifiable information and requires utmost care in handling

Casino Name(s): \_\_\_\_\_

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2. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Select the Role(s):

- Casino Activity Reports
  - Contains weekly Cash Played reports for your casino and others; monthly per-slot performance reports for your casino
  - Recommended for those who look at financials, perform analysis for your casino
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**Casino Name(s):** \_\_\_\_\_

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3. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

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**Casino Name(s):** \_\_\_\_\_

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4. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Select the Role(s):

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**Casino Name(s):** \_\_\_\_\_

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5. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

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Casino Name(s): \_\_\_\_\_

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6. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Select the Role(s):

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Casino Name(s): \_\_\_\_\_

A username and temporary password will be emailed to the address provided above once your request is completed.

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Casino Name/Ownership Group of Signing Authority: \_\_\_\_\_

Name of Signing Authority: \_\_\_\_\_

Signature of Signing Authority: \_\_\_\_\_

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Privacy Statement

The personal information provided on this form is collected under the authority of section 33(c) of Alberta's *Freedom of Information and Protection of Privacy (FOIP) Act*. The information is strictly for the use of the Alberta Gaming and Liquor Commission (AGLC) and is intended to be used for the purpose of processing deposit payments into the account you specify.

The personal information you provide is managed according to AGLC's retention and disposition policies and Part 2 of the *FOIP Act* under which you have a right of access to your personal information.