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 GCB 5/17

New Mexico Gaming Control Board

## KEY & AFFILIATED PERSON FACE SHEET FORM

**(EFFECTIVE MAY 2017)**

|  |        |                        |   |   |                           |
|--|--------|------------------------|---|---|---------------------------|
| Applicant's Printed Name (last, first, middle)   |        |                        |   |   |                           |
| Maiden/Married Names Past or Presently Used (Attach separate sheet if necessary)   |        |                        | Nicknames, Aliases, or any name that you have ever been known by (Attach separate sheet if necessary) |   |                           |
| Sex<br><input type="checkbox"/> M <input type="checkbox"/> F   |        | Social Security Number |   | Date of Birth                                       |                           |
| Place of Birth (city, state, country)  |        |                        |   | Drivers License No. / I.D. # & State License Issued |                           |
| Height   | Weight | Hair Color             | Eye Color   | Email Address                                       |                           |
| Physical Address   |        |                        |   |   | Contact Number<br>(     ) |
| City   |        | State                  | Zip   | County  | Length at This Address    |
| Mailing Address, if different from Physical Address (city, state, zip)   |        |                        |   |   |                           |
| Name of Gaming Business with Whom you are Affiliated:  |        |                        | Entity License #  | Work Phone<br>(     )                               | Responsibility/Title      |
| Are You Replacing Another Key/Affiliated Person?<br><input type="checkbox"/> Y <input type="checkbox"/> N    "If YES", Indicate Name and Title Here:   |        |                        |   |   |                           |
| Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Common-Law <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Engaged  |        |                        |   |   |                           |
| Do You Currently Possess a New Mexico Gaming Work Permit with the Entity You Are Currently Applying For As a Key and Affiliated Person?<br><input type="checkbox"/> Y <input type="checkbox"/> N    "If YES", You <u>MUST</u> Surrender immediatly And Enclose Your Work Permit/Badge With Your Completed Application. |        |                        |   |   |                           |

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

I understand that checking this box constitutes a legal signature.