



Dear NYRA Bets Customer,

Thank you for contacting NYRA Support regarding your change in information. Please complete the form attached to this email or submit by fax to # 1-866-697-2946 or to our mailing address:

NYRA Bets Account Manager

P. O. Box 90
Jamaica, NY 11417

Please note that P.O. Boxes are not considered valid addresses and will not be accepted for any information change request.

Best Regards,
NYRA Support



INFORMATION CHANGE REQUEST

Be sure to complete all fields, sign and date.

NYRA BETS ACCOUNT # _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

EMAIL _____

PRIMARY PHONE NUMBER _____

ALTERNATE PHONE NUMBER _____

Update only if applicable:

OCCUPATION _____

ON-TRACK PIN # (4 NUMBERS, NO LETTERS) _____

TELEPHONE ACCESS CODE (2-8 LETTERS, NO NUMBERS) _____

X

SIGNATURE

DATE

FOR OFFICIAL USE ONLY

DATE _____ TIME _____

BELMONT PARK LOCATION:

- 1st Floor Grandstand x4306
- 2nd Floor Grandstand x4687
- Other: _____ x _____