**GLAZER ALAN** Form 4 October 30, 2006

#### **OMB APPROVAL**

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

January 31, Expires: STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

2005 Estimated average burden hours per 0.5

**SECURITIES** 

response...

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

Common

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading **GLAZER ALAN** Issuer Symbol ISLE OF CAPRI CASINOS INC (Check all applicable) [ISLE] (Last) (First) (Middle) 3. Date of Earliest Transaction \_X\_\_ Director 10% Owner Officer (give title \_ Other (specify (Month/Day/Year) below) 600 EMERSON ROAD, SUITE 300 10/26/2006 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting SAINT LOUIS, MO 63141 Person

| (City)                 | (State) (A                           | Table Table                   | I - Non-Do | erivative So | ecurities Ac    | quired, Disposed           | of, or Beneficia           | lly Owned             |
|------------------------|--------------------------------------|-------------------------------|------------|--------------|-----------------|----------------------------|----------------------------|-----------------------|
| 1.Title of<br>Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3.         | 4. Securiti  |                 | 5. Amount of Securities    | 6. Ownership Form: Direct  | 7. Nature of Indirect |
| (Instr. 3)             | (Month/Day/Tear)                     | any                           | Code       | Disposed     | of (D)          | Beneficially               | (D) or                     | Beneficial            |
|                        |                                      | (Month/Day/Year)              | (Instr. 8) | (Instr. 3, 4 | 4 and 5)        | Owned<br>Following         | Indirect (I)<br>(Instr. 4) | Ownership (Instr. 4)  |
|                        |                                      |                               |            |              | (A)             | Reported<br>Transaction(s) |                            |                       |
|                        |                                      |                               | Code V     | Amount       | or<br>(D) Price | (Instr. 3 and 4)           |                            |                       |
| Common<br>Stock        |                                      |                               |            |              |                 | 49,000                     | D                          |                       |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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1,000

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#### Edgar Filing: GLAZER ALAN - Form 4

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transaction<br>Code<br>(Instr. 8) | 5. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) |                    | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |                                     |
|---|---|--------------------------------------|---|---|--|--|--------------------|---|-------------------------------------|
|   |   |                                      |   | Code V                                  | (A) (D)  | Date<br>Exercisable                                      | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of Shares |
| Stock Options (Right to buy)                        | \$ 25.01  | 10/26/2006                           | 10/26/2006  | A                                       | 10,000   | 10/26/2007   | 10/26/2016         | Common<br>Stock   | 10,000                              |

# **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |         |       |  |  |
|--------------------------------|---------------|-----------|---------|-------|--|--|
| 1 6                            | Director      | 10% Owner | Officer | Other |  |  |
| GLAZER ALAN                    |               |           |         |       |  |  |
| 600 EMERSON ROAD               | X             |           |         |       |  |  |
| SUITE 300                      | Λ             |           |         |       |  |  |
| SAINT LOUIS, MO 63141          |               |           |         |       |  |  |

# **Signatures**

/s/ Donn R. Mitchell, II
attorney-in-fact

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Exercisable 20% per year beginning 10/26/2007 to 10/26/2011, respectively.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2