



ELIGIBILITY QUESTIONNAIRE FOR LOTTERY LICENCES

Name of Organization _____

Municipal Address _____
(include postal code)

Mailing Address _____
(if different from above)

Type of Lottery Licence being applied for in the Municipality of West Perth:

- Bingo Break Open Ticket Raffle Bazaar

Is the organization incorporated as a non-profit organization in the Province of Ontario?

Yes _____ Incorporation # _____ No _____

Is the organization registered with Canada Customs and Revenue Agency as a charitable organization?

Yes _____ Registration # _____ No _____

Jurisdiction of Incorporation _____

How long has the organization been in existence? _____

How many persons comprise your current membership? _____

Describe the requirements that a person must meet in order to become a bona fide member of your organization?

Describe your organization's aims and objectives.

Indicate the specific purpose(s) for which lottery proceeds will be used (attach separate list if necessary). Information will be used to update annual lists on file.

Organization's Fiscal Year-End Date _____

The designated member of the organization who will be responsible for keeping and maintaining records of all financial transactions pertaining to licenced lottery events:

Name _____
Address _____
Telephone # _____ (include postal code)

Is the organization currently licenced, or ever been licenced, in any other municipality to conduct bingo, break open ticket or raffle lotteries?

Bingo Yes _____ No _____

If yes, list other municipalities _____

Break Open Tickets Yes _____ No _____

Has the organization ever had a licence revoked or refused?

Yes _____ No _____

If yes, where? _____

Raffle Tickets Yes _____ No _____

Has the organization ever had a licence revoked or refused?

Yes _____ No _____

If yes, where? _____

This Eligibility Questionnaire must be signed by two (2) principal officers of the organization.

When submitted, this questionnaire must be accompanied by the following:

1. The most recent copy of the organization's Governing Document(s) (i.e. Articles of Incorporation, Constitution, Letters Patent, By-Laws, Charter).
2. Registered Charities must confirm their charitable status by providing a copy of the most recent filing with Revenue Canada.
3. List of the Board of Directors, including names, addresses and phone numbers.
4. List of the current members, including names, addresses and phone numbers.
5. Financial Statement for the last completed fiscal year-end.
6. Proposed Budget for current year.

We the undersigned, declare that all information provided in and with this statement is factual and correct.

Personal information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act and will be used to determine eligibility for lottery licencing. Questions regarding this collection should be forwarded to the Clerk at (519)348-8429 ext. 224.

Print name of Principal Officer

Print name of Principal Officer

Signature of Principal Officer

Signature of Principal Officer

Title of Principal Officer

Title of Principal Officer

Date

Date