



**APPLICATION FOR LOTTERY LICENSING ELIGIBILITY**

Please complete the following lottery organization information to be kept on record at the Municipality of Leamington.

**Application to Update Current Lottery Licensing Information**

**If we have your CURRENT By-laws and/or Constitution on file, you need not reproduce them.**

The Corporation of the Municipality of Leamington follow Lottery Licensing Policies as developed by the Alcohol and Gaming Commission of Ontario, the *Criminal Code* of Canada, the Order-in-Council 2688/03 (as amended), and the *Gaming Control Act, 1992* and its Regulations.

Is this a NEW application for Eligibility?

Yes  No

1. Name of Organization \_\_\_\_\_

2. Municipal Address \_\_\_\_\_  
(Include postal code)

Mailing Address \_\_\_\_\_  
(If different from above)

3. Is the Organization incorporated as a non-profit Organization in the Province of Ontario?  
Please provide a copy.

Yes, Incorporation No. \_\_\_\_\_ or  No

4. Is the Organization registered with the Canada Customs and Revenue Agency as a charitable organization? Please provide copy.

Yes, Registration No. \_\_\_\_\_ or  No

Jurisdiction of Incorporation \_\_\_\_\_

Please provide:  a) a current copy of letter from Canada Customs and Revenue Agency  
(letter recognizing charitable status under the Income Tax Act)

b) a copy of most recent filing with Canada Customs and Revenue Agency

5. How long has your Organization been in existence? \_\_\_\_\_ year(s)

6. How many members comprise your bona fide membership? \_\_\_\_\_

How many times per year does your group meet? \_\_\_\_\_

Please provide a list containing the names, addresses and telephone numbers of all *bona fide* members (and ages if for a youth group), **and** a list of the current executive.

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Describe your organization's aims, objectives and services you provide.

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Please provide a copy of the Organization's articles of incorporation and/or constitution, as well as any by-laws, if applicable.

8. Indicate the specific purpose(s) to which lottery proceeds will be applicable.

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9. The Organization's lottery trust account (if open at this time)  
(NOTE: It will be required at the time of application)

Name of Financial Institution \_\_\_\_\_  
Address of Financial Institution \_\_\_\_\_  
(Including postal code)  
Phone # of Financial Institution \_\_\_\_\_  
Lottery Trust Account # \_\_\_\_\_

10. The Organization's Financial Year-end date: \_\_\_\_\_

Provide a copy of the organization's complete budget, covering the current twelve month fiscal or calendar year, detailing how resources will be acquired and dispersed during this period.

Provide a copy of your previous year's financial statement.

11. The designated member of the organization who will be responsible for keeping and maintaining records of all financial transactions pertaining to the licensed lottery activities:  
(If this designated member changes, the municipality **must** be notified **immediately**)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Numbers

12. Is the Organization currently licensed, or ever been licensed, in any other municipality to conduct lottery events?

 Yes

 No

If Yes, location of Lottery Events:

	Bingo	Break-Open Tickets	Raffle
Municipality			
Name of Location			
Address			
Currently licensed?			

13. Has the Organization had a licence revoked or refused?  Yes  No

If Yes, where? \_\_\_\_\_

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

\_\_\_\_\_  
Print name of Principle Officer

\_\_\_\_\_  
Print name of Principle Officer

\_\_\_\_\_  
Signature of Principle Officer

\_\_\_\_\_  
Signature of Principle Officer

\_\_\_\_\_  
Title

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

***\*\* Please refer to the Municipal Freedom of Information and Protection of Privacy Act section 8.8 (1) for disclosure information.***

***\*\* Please provide any further material that you may find pertinent to process your application (e.g. current flyers).***

***\*\*All approved organizations may be subject to periodic eligibility reviews.***

If you have any further questions pertaining to your eligibility, please refer to The Alcohol and Gaming Commission of Ontario's webpage, [www.agco.on.ca](http://www.agco.on.ca). All the above information must come into this office before a lottery licence will be issued to your Organization. If you have any questions concerning Lottery Licensing in the Municipality of Leamington, please feel free to contact this office. Charities are encouraged to keep a completed copy for their reference.

Kim Siddall, Manager of Corporate Services,  
Deputy Licensing Officer  
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