

Before completing the attached licence application form, please read the following information:

The attached casino licence application is comprised of three separate sections (Casino Event Details, Electronic Funds Transfer (EFT) Request & Volunteer Worker Applications) and must be completed in full prior to submission. Applications will not be processed if all required information has not been completed and supporting documents have not been included. **Casino Licence Applications must be submitted at least sixty (60) days prior to the scheduled casino event.**

Casino Event Details

- Please ensure all sections of the licence application are completed in full by completing the checklist on page 2 prior to submission.
- The Casino Licence will be mailed to the Casino Chairperson. The licence must be displayed at the casino facility for the duration of the event.

Electronic Funds Transfer (EFT) Request

To ensure deposit of pooling revenue into the organization's casino bank account, each organization **must** provide accurate casino bank account information by completing the attached form **in full** and attaching an **unaltered photocopy of the VOID cheque** for the casino bank account. **The cheque must be preprinted with the legal name of the group or bank verification will be required.**

Volunteer Worker Applications (VWA)

Each volunteer working in one of the key positions must complete and submit a Volunteer Worker Application (VWA). A minimum of five (5) VWAs must be submitted with the Casino Licence Application.

 **Retain copies of all documents submitted to Alberta Gaming, Liquor and Cannabis.**

PLEASE KEEP A COPY OF YOUR APPLICATION AND ALL SUPPORT DOCUMENTS SUBMITTED.

LICENSING INFORMATION

Alberta Gaming, Liquor and Cannabis (AGLC) is responsible for administering and regulating the gaming industry in Alberta, including the licensing of charitable gaming activities. Only charities or religious groups are licensed. All proceeds from the licensed activity must be used for charitable or religious activities.

To apply for a licence, the application form must be complete, and all required supporting documents must be submitted for review. The information must be correct and up-to-date. This will minimize delays in processing requests.

- *Conducting a gaming event without a licence is a Criminal Code offence.*
- *All required financial reports must be up-to-date before new applications are processed.*

Applicants found eligible for gaming licensing may be subject to an eligibility review at any time to ensure continued compliance with AGLC policies.

LICENSING PROCESS

AGLC Regulatory Services Division is responsible for reviewing applications, issuing gaming licences, and enforcing the Act, Regulation, policies, and terms and conditions. AGLC must approve any changes to the approved licence or approved use of proceeds. Inspectors may visit gaming events to provide advice and information and to ensure that all requirements are being met, and/or conduct investigations of any alleged irregularities.

PREPARING FOR THE CASINO LICENCE

Submit **only one copy** of the casino licence application, including the electronic funds transfer (EFT) request with a photocopy of the void cheque and volunteer worker application forms for each key position to AGLC **by mail, fax or email approximately 60 days** prior to the casino event:

**Mail: AGLC
Licensing
50 Corriveau Avenue
St. Albert, Alberta T8N 3T5**

Email: gaming.licensing@aglc.ca

Fax: 780-447-8912

Incomplete applications may be returned to the organization and will result in processing delays.

CANCELLATION OF CASINO EVENT

Cancellation or withdrawal of a casino event must be submitted in writing to AGLC, signed by two authorized executive members. This should be done as soon as possible so that a replacement group can be found.

The group must also advise the appropriate casino facility of the cancellation of the event.

PLEASE DETACH AND RETAIN FOR YOUR INFORMATION

CASINO BANK ACCOUNT INFORMATION

- The Electronic Funds Transfer (EFT) Request is required in order to verify the group's casino bank account information for the electronic funds transfer. The form must be completed **in full**.
- Please ensure that the full legal name of the group is included on the form on the Payee Name line. Abbreviations will not be accepted.
- The EFT form must be signed and dated by the group's President or Treasurer.
- **Incomplete or incorrect forms will be returned to the group for completion or correction.**
- An unaltered photocopy of the void cheque for the casino bank account must be attached to the Electronic Funds Transfer (EFT) Request form. The cheque must be pre-printed with the legal name of the group.
- If the name printed on the cheque does not match the legally registered name of the group, bank verification will be required.

For additional information regarding casino bank account information requirements, please contact Casino Licensing at 780-651-7600 or 1-855-506-1066.

USE OF GAMING PROCEEDS

It is not necessary for applicants to specify the intended use of gaming proceeds as part of the gaming licence application. An organization may amend its use of gaming proceeds at any time. A Request to Amend Gaming Proceeds (FORM RS/GAM 5506) must be submitted to AGLC for approval prior to disbursement of proceeds. All amendments must be signed by two current executive members of the organization and include any required support documentation or completed forms.

Gaming proceeds must only be used for AGLC-approved uses essential to the delivery of the group's charitable or religious programs in accordance with AGLC Charitable Gaming Policies Handbook (CGPH). Prior approval must be obtained before disbursement of proceeds. A use of proceeds not specifically accommodated in the CGPH is considered an ineligible use.

Disbursement of gaming proceeds must be made within 24 months of receipt of the proceeds. Any extension of this time period must have prior written approval. All requests to retain proceeds beyond 24 months must include a dollar amount, a project end date for the use of proceeds, and the purpose for which the proceeds will be used. The request must be signed by two current executive members.

All programs where gaming proceeds are used, and for which a fee is charged or for which funds are received, must be managed on a cost-recovery basis. Cost recovery means the use of gaming proceeds to pay for program costs is limited to the amount not covered by program revenues.

The organization's Current Use of Proceeds List will be mailed under separate cover to the organization address to the attention of the Treasurer.

FINANCIAL REPORTING

- Financial reports are required for each gaming licence (bingo, casino, pull-ticket, raffle) issued and will be mailed to the licensed group by AGLC. Financial reports are required for consolidated accounts.
- Completed reports with supporting documents shall be returned to AGLC within sixty (60) days. Failure to submit these reports or to comply with the terms and conditions of the licence may affect future licences.
- If a group has more than one active licence, they are encouraged to open a "Consolidated Gaming Account" for the expenditure of their gaming proceeds. The group will transfer these proceeds from their individual gaming accounts into this account. The benefits of this account are:
 - cheques for approved use of proceeds are issued from one account; and
 - easier tracking of proceeds available for distribution.

For additional information on financial reporting, please contact AGLC Financial Review Section, 780-447-8600 or 1-800-272-8876 for more information.

AGLC INTERNET ACCOUNT

On line web-based services are currently available to registered charitable gaming organizations. In order to access AGLC's secure, web application services, your organization will be required to complete the Internet Account Request Form available on AGLC web site at www.aglc.ca.

The list of services available to charitable gaming organizations are:

- a list of gaming licences;
- consolidated bank account information;
- organization contact list;
- current use of proceeds list; and
- the ability to submit raffles financial forms for raffles licences with a total ticket value of \$10,000 or Less on line.

PROTECTION OF PRIVACY

The personal information requested on this form is collected under the authority of Section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. It will be used for the administration of all policies and processes relating to Charitable Gaming Licensing. Direct any questions about this collection to: AGLC FOIP Coordinator, 50 Corriveau Avenue, St. Albert, AB T8N 3T5, 780-447-8600 or toll free at 1-800-272-8876.

This form may be obtained from our website: aglc.ca



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CASINO LICENCE APPLICATION

BEFORE COMPLETING THIS APPLICATION, PLEASE READ THE ATTACHED CASINO LICENCE GUIDELINES.
THE APPLICATION MUST BE SUBMITTED BY EMAIL OR FAX APPROXIMATELY 60 DAYS PRIOR TO THE CASINO EVENT.

Application Date Completed: yy | mm | dd
AGLC ID #:
ORGANIZATION NAME: (as it appears on the Certificate of Incorporation)
Organization's Legal Address:
Mailing Address: (if different than legal)
City Province Postal Code City Province Postal Code
Organization Phone Organization Email Organization Website
Incorporated Under: Societies Act Companies Act Other specify
Incorporation Number: Incorporation Date: How long has organization existed? # of Members: # of Executive:
AGLC requires a Communication Contact email address for purposes of sharing and collecting important information related to charitable gaming licensing, policies and processes. Please ensure this email is updated regularly. If no email is provided, the organization mailing address will be used.
Communication Contact Email:

CASINO CHAIRPERSON (For correspondence - may be contacted for clarification of this application)
Print Full Name:
Date of Birth: yy | mm | dd
Mailing Address:
Postal Code
Residence Phone: Business Phone: Fax: Email:
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AUTHORIZATION FOR APPLICATION - The undersigned confirm a) they are authorized to make this application b) all information on or related to this application is current and accurate, and c) they will provide any information regarding the approved gaming bank account to AGLC upon request.
Executive #1 Signature: Term Expires: yy | mm | dd
Print Full Name: Date of Birth: yy | mm | dd
Position Held:
Mailing Address:
Postal Code
Residence Phone: Business Phone: Fax: Email:
() () ()
Executive #2 Signature: Term Expires: yy | mm | dd
Print Full Name: Date of Birth: yy | mm | dd
Position Held:
Mailing Address:
Postal Code
Residence Phone: Business Phone: Fax: Email:
() () ()

CASINO LOCATION:
DATES OF EVENT:

CASINO LICENCE APPLICATION CHECKLIST

In order to process your application efficiently, please ensure the following information is included:

Casino Event Details

Page 1

- Group information (legal name, address, etc.)
- Casino Chairperson (may be contacted for clarification of this application)
- The President's and Treasurer's signatures must be on the application
- Casino location and casino dates

Page 2

- Casino bank account number
- Staffing – volunteer key position – list individuals working in the following key positions: General Manager, Alternate General Manager, Banker, Count Room Supervisor & Cashier
- Registered Advisor name(s)

Electronic Funds Transfer

This form is used to verify the casino account for an electronic funds transfer. It must be completed in full. Incomplete forms will be returned to the group for correction.

- Electronic Funds Transfer (EFT) Request *must* be completed in full and signed. The full legal name of the group is required. Abbreviations will not be accepted.
- A pre-printed, unaltered photocopy of the VOID cheque for the casino bank account *must* be attached.

VOLUNTEER WORKER APPLICATION FORMS (please print clearly)

- Volunteer Worker Application forms must be completed in all areas, including the criminal record question
- Volunteer Worker Application forms are required for each key position volunteer *only*.

Submit only one copy of your completed Casino Licence Application, including the EFT form with the pre-printed, unaltered, photocopy of the VOID cheque and Volunteer Worker Application forms by mail, fax or email approximately 60 days prior to your casino event.

CASINO BANK ACCOUNT

You may use an existing casino account for each approved casino event. The account shall have chequing privileges, and monthly return of cancelled cheques. All casino revenue shall be deposited into this account, and all payments are made by cheque.

Note: *This section MUST be completed to match the information listed on the group's void cheque.*

Name of Financial Institution: *(bank, credit union, etc.)*

TRANSIT NUMBER

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INSTITUTION CODE

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ACCOUNT NUMBER

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STAFFING - VOLUNTEER KEY POSITIONS (General Manager, Alternate General Manager, Banker, Count Room Supervisor and Cashier)

Volunteers in key positions must be a member of the organization. A minimum of five (5) names **must be** provided. A Casino Volunteer Worker Application form must be submitted for each volunteer in a key position.

_____	_____	_____
_____	_____	_____
_____	_____	_____

REGISTERED ADVISORS

Only individuals currently registered with AGLC may work as Games Managers, Advisors, Pit Staff and Dealers. Licensed charities hire independent registered Advisors to ensure compliance with AGLC, Gaming, Liquor and Cannabis Act, Gaming, Liquor and Cannabis Regulation and Board policies.

Name

*Registered Cash Cage Advisor:

Registered Count Room Advisor:

_____	_____
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ELECTRONIC FUNDS TRANSFER (EFT) REQUEST

PLEASE IDENTIFY THE PURPOSE FOR THIS APPLICATION:

Charitable Organization Liquor Agent/Supplier Vendor Other (specify): _____

Is this a change to an existing account? Yes No

For Liquor Agent/Supplier, please provide Payee #: _____

PAYEE INFORMATION

Name: _____

Street Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Email*: _____

Contact Person: _____ Website: _____

**will be used for electronic payment remittance (not applicable for Liquor Agent/Supplier)*

FINANCIAL INFORMATION – Electronic Funds Transfer is only available for Canadian Bank Accounts

Name of Financial Institution: _____

Street Address: _____

City: _____ Province: _____ Postal Code: _____

IMPORTANT:

Charitable Organizations – e-mail completed form to gaming.licensing@aglc.ca

Other Applicants - e-mail completed form to vendormaintenance@aglc.ca OR send to AGLC, Vendor Maintenance, 50 Corriveau Avenue, St. Albert AB T8N 3T5

THIS FORM MUST BE ACCOMPANIED WITH A COPY OF A VOIDED CHEQUE OR A BANK ACCOUNT VERIFICATION LETTER ON BANK LETTERHEAD.

I am authorized to sign on behalf of the Payee and direct payment to be made to the account at the financial institution specified on this form. For Charitable Organizations, this must be the President and/or Treasurer of the organization.

Printed Name Title

Signature Date

AGLC USE ONLY

_____ Originating Department	_____ Printed Name	_____ Date	_____ JDE Number
_____ Casino Name	_____	_____ Event Date	_____

Protection of Privacy

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