

Consent to Records Check

ALL AREAS OF THIS FORM MUST BE COMPLETED IN FULL (e.g. full name including middle name, contact number, etc.). Failure to do so will render the form incomplete and will therefore not be processed.

I, _____ of _____
First
Middle
Last
(Print Full Name)

 (Address, City, Town, Province and Postal Code)

Date of Birth: _____ Male Female
(month/day/year)

SIN: _____ Phone: _____

Signature: _____ Date: _____
MUST BE ORIGINAL SIGNATURE

hereby consent to the Alberta Gaming, Liquor & Cannabis Commission conducting criminal and financial indices checks on myself as a result of: ***Check Applicable Section***

A. my application for **Registration** as a Bingo Hall Manager, Asst. Bingo Hall Manager and/or Pull Ticket Manager.

B. my duties as _____, on behalf of _____
(position)
 _____, at _____
(employer) (location)

C. my interest for employment as a: (check box) Manager Host/Caller Cashier
 or _____, with _____,
(state other) (Operator)
 _____, an Electronic Games Service provider.
(location)

D. my association with an AGLC designated VLT Cross Validation site _____
(location)

NB: Criminal indices checks are conducted but are not limited to checks for persons who have been charged but not yet convicted, are subject of court orders or prohibitions, are under investigation by a police or related government agency (Immigration, Canadian Border Services etc.) or are a danger to the public. Financial checks are conducted through Equifax, an agency also used by department stores, credit card companies, banks, car dealerships etc.

A privacy statement for the collection of personal information may be found at www.aglc.ca