

Submit					
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Bingo Association Bingo Facility Licence Application

Bingo Association								
Full Name (Please Print)								
Association Address			City/Town		ce	Postal Code		
Contact		Business Phone		Email				
Mailing Address or Name and Address to Where Future Correspondence Should be Mailed if Different Than Above								
Name								
Address		City/	City/Town		ce	Postal Code		
Phone		Email	I					
Authorization for Application								
We certify that: all information and documents supplied are correct. Any AGLC Inspector may examine and make copies of all records relating to this application and/or licence. This includes the approved bank account(s) at any financial institution(s).								
President's Signature			Association Representative's (Admin) Signature					
Full Name (Please Print)			Full Name (Please Print)					
Mailing Address			Mailing Address					
City/Town	Province	Postal Code	City/Town		Province	Postal Code		
Contact Phone	Email	I	Contact Phone		Email			
List of Persons Who Can Request Amendments to Bingo Programs, Schemes, Facility Licence or Pull Ticket Licence								
Position	Nar	ne		Contact F	Phone			



THE FOLLOWING MUST BE ATTACHED TO THIS APPLICATION

- □ Association member club bingo applications.
- □ Current list of executive (including Directors) with contact information.
- □ Executive Officers Particular form for each executive member; if executive is new please provide identification.
- □ Total number of events Association will operate during the full two year licence period. Please separate this figure into number of mornings, afternoons, evenings and late nights.
- □ Dates the hall will be closed during the licensed period.
- □ Licence fees \$10.00/event (fees may be submitted on a monthly, quarterly or yearly basis). Fees must be received no later than 15 days prior to the beginning selected term.
- \Box Lease **only** if existing lease is expiring during the licence period.
- □ Meeting minutes <u>only</u> if adding new group(s) at time of licence renewal.

Bingo Facility Licence Details Name of Bingo Facility Bingo Facility Address City/Town Province Postal Code Contact Person Phone Number

Signing Authority

By signature, I / we certify the above information is correct and the applicant is the owner or lessee of the premises covered by this application, and is in actual possession and control of those premises.

President's Signature	Date

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.

Your personal information is protected by Alberta's FOIP Act and can be reviewed upon request.

Direct any questions about this collection to:

AGLC FOIP Coordinator 50 Corriveau Avenue, St. Albert, Alberta T8N 3T5 780-447-8600 or toll free at 1-800-272-8876

Bingo/Pull Ticket Contact Information

50 Corriveau Avenue St. Albert, Alberta T8N 3T5 Toll-Free: 1-855-506-1066 ext. 6 Bingo and Pull Ticket: 780-651-7600 ext. 6 Email: gaming.licensing@aglc.ca

