

Eligibility for Gaming Licence

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

AGLC licenses and regulates the gaming industry in Alberta, including the licensing of charitable gaming activities.

The Criminal Code (Canada) requires that groups participating in charitable gaming are charitable and that the money earned from charitable gaming is directed to charitable purposes.

These four criteria are used to determine "what is a charitable purpose":

- ✓ Relief of poverty
- ✓ Advancement of education
- ✓ Advancement of religion
- ✓ Other purposes beneficial to the community

In order to be eligible to hold charitable gaming activities, a group must have a broad-based volunteer membership, a democratically chosen executive, and unpaid members and directors. Groups must demonstrate that they offer programs that benefit the broader community and not the self-interest of members.

A complete application form with current information including all requested supporting documents will prevent delays in processing the application. You will receive an answer in writing of the eligibility decision.

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

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.

| AGLC Contact Information | | |
|-----------------------------|---------------------------|---------------------------------|
| 50 Corriveau Avenue | Phone: 780-447-8600 | Website: aglc.ca |
| St. Albert, Alberta T8N 3T5 | Toll Free: 1-800-272-8876 | Email: gaming.licensing@aglc.ca |





Eligibility for Gaming Licence

Complete this Eligibility Application for Casino, Association Bingo, Raffle more than \$20,000 and Pull Ticket A record of active program delivery is required.

| What are you app | olying for? 🗌 Casinc | o 🗆 Ass | ociation | Bingo 🗌 | Raffle | e more than \$20,000 | □ Pull Ticket |
|--------------------|----------------------|------------|-----------|----------------------|---------|-----------------------|------------------------|
| Organization Lega | l Name: | | | | | Application Date Con | npleted: (yy/mm/dd) |
| Organization Lega | l Address: | | | | | City/Town | |
| Province | Postal Code | Communica | tion Con | tact Email | | | |
| Incorporated Und | ler: 🗆 Societies Act | : 🗆 Compa | nies Act | 🗆 Other: Sp | pecify: | | |
| Incorporation Nur | mber: | Ir | ncorporat | tion Date: | How | long has organization | n existed? |
| Number of Volunt | teer Voting Member | s: | | Number of | Volun | teer Elected Executiv | /es |
| Address: | s (if different than | legal) | | Province | | | Postal Code |
| City/Town | | | | Province Postal Code | | | Postal Code |
| Casino/Bingo/R | affle/Pull Ticket C | hairperson | (may be | contacted f | or cla | rification of this ap | plication) |
| Legal Last Name | | | | Legal First Name | | | |
| Legal Middle Nan | ne | | | Preferred Name | | | |
| Date of Birth (YY) | /MM/DD) | | | ender Male 🗆 Fe | male | □ Non-binary □ | Prefer not to disclose |
| Mailing Address | | Cit | ty/Town | | | Province | Postal Code |
| Contact Phone | | Email | | | | | |



| Authorization for Application | | | | | |
|--|---|--|----------------------------|--|--|
| WE CERTIFY THAT: all information of all | ation and documents supplied a fields is mandatory. | are correct, and the group has | authorized us to make this | | |
| Volunteer Elected Executive #1 Signature | | Volunteer Elected Executive #2 Signature | | | |
| Full Legal Name (Print) | | Full Legal Name (Print) | | | |
| Date of Birth (YY/MM/DD) | | Date of Birth (YY/MM/DD) | | | |
| Gender | | Gender | | | |
| 🗆 Male 🛛 Femal | e 🗌 Other | □ Male □ Female □ Other | | | |
| Position Held | | Position Held | | | |
| Mailing Address | | Mailing Address | | | |
| City/Town | | City/Town | | | |
| Province | Postal Code | Province | Postal Code | | |
| Contact Phone | | Contact Phone | | | |
| Email | | Email | | | |

Keep copies of all documents submitted to AGLC for your organization's records.

| Community Benefit Statement |
|---|
| 1. What is the group's primary purpose and objective(s)? |
| |
| |
| |
| |
| |
| Provide a list of all programs provided by the group in the past one (1) year. For each program listed, provide a detailed description of what the program entails, the program's benefit to the public and members, where and when the program was delivered, who conducted the program, who the program recipients were, how many people were involved in the program, as well as any documentation demonstrating actual delivery of the program. |
| |
| |
| 3. Who determines what activities/programs the group delivers (i.e., Board of Directors, Governing Body, Government, etc.)? |
| |
| |
| 4. a) Is the group affiliated with any other organization (parent group, governing body, government service, etc.)? |
| □ Yes □ No If yes, what group? |
| b) If the group is a Provincial or regional governing body, explain the structure of the group, how funds flow throughout the group and any common programs. |
| |
| |
| |
| 5. If you are an amateur athletic group, describe the programs specifically for youth; adults; seniors; and/or the disabled. To which sport governing body does the group belong? |
| |
| |
| |
| 6. How does the group generate income? What funding do you receive? (e.g. rent, product sales, user fees, etc.) |
| |
| |
| |
| |



| If the group has a facility, provide a description and record of facility usage (eg. calendar of events, bookings summary, etc.) D. Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | | |
|--|---|--|
| a) If the group owns or rents a facility, provide a Land Title Certificate or Lease Agreement. If the group has a facility, provide a description and record of facility usage (eg. calendar of events, bookings summary, etc.) Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | a) Does the group receive Government funding? \square Yes | □ No If yes, describe. |
| a) If the group owns or rents a facility, provide a Land Title Certificate or Lease Agreement. If the group has a facility, provide a description and record of facility usage (eg. calendar of events, bookings summary, etc.) Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | | |
| a) If the group owns or rents a facility, provide a Land Title Certificate or Lease Agreement. If the group has a facility, provide a description and record of facility usage (eg. calendar of events, bookings summary, etc.) Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | | |
| a) If the group owns or rents a facility, provide a Land Title Certificate or Lease Agreement. If the group has a facility, provide a description and record of facility usage (eg. calendar of events, bookings summary, etc.) Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | Doos the group receive grapts? Vos No If yos list | all current grants and describe the nurness for each |
| If the group has a facility, provide a description and record of facility usage (eg. calendar of events, bookings summary, etc.) D. Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | | an current grants and describe the purpose for each. |
| If the group has a facility, provide a description and record of facility usage (eg. calendar of events, bookings summary, etc.) D. Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | | |
| If the group has a facility, provide a description and record of facility usage (eg. calendar of events, bookings summary, etc.) Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | | |
| Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | | |
| If the group has a facility, provide a description and record of facility usage (eg. calendar of events, bookings summary, etc.) Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | | |
| If the group has a facility, provide a description and record of facility usage (eg. calendar of events, bookings summary, etc.) Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | a) If the group owns or roots a facility, provide a Land 3 | Title Cortificate or Lease Agroement |
| summary, etc.) 0. Provide information on any other groups or organizations within the same facility and provide information on any shared costs. | | _ |
| 0. Provide information on any other groups or organizations within the same facility and provide information | | cord of facility usage (eg. calendar of events, bookings |
| on any shared costs. | | |
| | | ons within the same facility and provide information |
| low do you propose to spend your gaming proceeds? | on any shared costs. | |
| low do you propose to spend your gaming proceeds? | | |
| low do you propose to spend your gaming proceeds? | | |
| low do you propose to spend your gaming proceeds? | | |
| low do you propose to spend your gaming proceeds? | | |
| | low do you propose to spend your gaming proceed | s? |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| estions are answered in detail. Your application will not be processed if the information has not been npleted and/or supporting documents have not been included <i>(attach additional pages if necessary)</i> . | | , |

| \Box Minutes from a recent executive c | | | |
|--|-------------------|------------------|------------------------------|
| I IVIINUTES from a recent executive o | r peneral meeting | snowing a motion | |
| | - Beneral meeting | | additioning the application. |

| □ Copy of groups operating bylaws. | Note: Bylaws from Alberta Registries must show the Corporate Registry "FILED" |
|------------------------------------|---|
| stamp. | |

□ Current volunteer executive list, including addresses and telephone numbers. Use List of Elected Form 5471 attached.

□ Current volunteer voting membership list, including addresses and telephone numbers.

 \Box Budget for the current year or proposed budget for upcoming fiscal year.

□ Balance sheet, income and expense statements for the last one (1) year that prove the program has been operational for the minimum requirement of 12 months.

□ Land Title Certificate or Lease/Rental Agreement.

 \Box Fully completed application form with required signatures.