

List of Elected Executive

Date Completed:

AGLC requests a communication contact email address for purposes of sharing or requesting important information related to charitable gaming licensing. Ensure this email is updated.

Communication Contact Email

Group Name		AGLC ID Number	
Mailing Address	City/Town	Province	Postal Code
Website			

Volunteer elected executive positions may not be held by related members that are connected by birth relationship (i.e., parent, child, brother and sister), marriage, common-law partnership or adoption. One individual must not hold more than one executive positions unless permitted in the group's bylaws (e.g. secretary/treasurer).

Volunteer Elected President			
Legal Last Name	Legal First Name		🗆 Female 🛛 Other
Legal Middle Name	Preferred Name	Date of	Birth (YY/MM/DD)
Mailing Address	City/Town	Province	Postal Code
Contact Phone	Email		

Volunteer Elected Treasurer				
Legal Last Name	Legal First Name			🗆 Female 🛛 Other
Legal Middle Name	Preferred Name			Birth (YY/MM/DD)
Mailing Address	City/Town	Pro	vince	Postal Code
Contact Phone	Email			

Volunteer Elected Secretary				
Legal Last Name	Legal First Name		nder Male [🗆 Female 🛛 Other
Legal Middle Name	Preferred Name		Date of	Birth (YY/MM/DD)
Mailing Address	City/Town	Pro	vince	Postal Code
Contact Phone	Email			



Volunteer Elected Vice President				
Legal Last Name	Legal First Name		nder Male [🗌 Female 🛛 Other
Legal Middle Name	Preferred Name		Date of I	Birth (YY/MM/DD)
Mailing Address	City/Town	Prov	vince	Postal Code
Contact Phone	Email			

Volunteer Elected Secretary/Treasurer (if	applicable)				
Legal Last Name	Legal First Nam	e	Gend		🗌 Female 🛛 Other
Legal Middle Name	Preferred Nam	ne	Da	ate of E	Birth (YY/MM/DD)
Mailing Address	City/To	wn	Provin	ce	Postal Code
Contact Phone	Email				

Casino Chairperson					
Legal Last Name	Legal First Nam	ne			🗆 Female 🛛 Other
Legal Middle Name	Preferred Nar	-		Date of I	Birth (YY/MM/DD)
Mailing Address	City/To	own	Pro	vince	Postal Code
Contact Phone	Email				

Bingo Chairperson				
Legal Last Name	Legal First Name			🗆 Female 🛛 Other
Legal Middle Name	Preferred Name		Date of	Birth (YY/MM/DD)
Mailing Address	City/Town	Pro	vince	Postal Code
Contact Phone	Email			

Raffle Chairperson			
Legal Last Name	Legal First Name	Gender	Female Other
Legal Middle Name	Preferred Name	Date of	f Birth (YY/MM/DD)
Mailing Address	City/Town	Province	Postal Code
Contact Phone	Email		



Pull Ticket Chairperson			
Legal Last Name	Legal First Name	Gende	er ale 🛛 Female 🗌 Other
Legal Middle Name	Preferred Name	Da	ate of Birth (YY/MM/DD)
Mailing Address	City/Town	Provinc	ce Postal Code
Contact Phone	Email		

Other Position		
Position Held		
Legal Last Name	Legal First Name	Gender □ Male □ Female □ Other
Legal Middle Name	Preferred Name	Date of Birth (YY/MM/DD)
Mailing Address	City/Town	Province Postal Code
Contact Phone	Email	

AGLC Contact Information			
50 Corriveau Avenue	Phone: 780-651-7600 Toll -Free 1-8	55-506-1066	Website: aglc.ca
St. Albert, Alberta T8N 3T5	Fax: 780-447-8911 or 447-8912	Email: gami	ing.licensing@aglc.ca

