

Date Completed:

List of Elected Executive

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	
Legal Middle Name		Preferred Name	
Date of Birth (YY/MM/DD)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to disclose	
Mailing Address	City/Town	Province	Postal Code
Contact Phone		Email	

Volunteer Elected Treasurer			
Legal Last Name		Legal First Name	
Legal Middle Name		Preferred Name	
Date of Birth (YY/MM/DD)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to disclose	
Mailing Address	City/Town	Province	Postal Code
Contact Phone		Email	

Volunteer Elected Secretary			
Legal Last Name		Legal First Name	
Legal Middle Name		Preferred Name	
Date of Birth (YY/MM/DD)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to disclose	
Mailing Address	City/Town	Province	Postal Code
Contact Phone		Email	

Volunteer Elected Vice President

Legal Last Name		Legal First Name	
Legal Middle Name		Preferred Name	
Date of Birth (YY/MM/DD)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to disclose	
Mailing Address	City/Town	Province	Postal Code
Contact Phone		Email	

Volunteer Elected Secretary/Treasurer (if applicable)

Legal Last Name		Legal First Name	
Legal Middle Name		Preferred Name	
Date of Birth (YY/MM/DD)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to disclose	
Mailing Address	City/Town	Province	Postal Code
Contact Phone		Email	

Casino Chairperson

Legal Last Name		Legal First Name	
Legal Middle Name		Preferred Name	
Date of Birth (YY/MM/DD)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to disclose	
Mailing Address	City/Town	Province	Postal Code
Contact Phone		Email	

Bingo Chairperson

Legal Last Name		Legal First Name	
Legal Middle Name		Preferred Name	
Date of Birth (YY/MM/DD)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to disclose	
Mailing Address	City/Town	Province	Postal Code
Contact Phone		Email	

Raffle Chairperson			
Legal Last Name		Legal First Name	
Legal Middle Name		Preferred Name	
Date of Birth (YY/MM/DD)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to disclose	
Mailing Address	City/Town	Province	Postal Code
Contact Phone		Email	

Pull Ticket Chairperson			
Legal Last Name		Legal First Name	
Legal Middle Name		Preferred Name	
Date of Birth (YY/MM/DD)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to disclose	
Mailing Address	City/Town	Province	Postal Code
Contact Phone		Email	

Other Position			
Position Held			
Legal Last Name		Legal First Name	
Legal Middle Name		Preferred Name	
Date of Birth (YY/MM/DD)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to disclose	
Mailing Address	City/Town	Province	Postal Code
Contact Phone		Email	

PROTECTION OF PRIVACY

The personal information requested on this form is collected under the authority of Section 4(c) of the Alberta Protection of Privacy Act. It will be used for the administration of all policies and processes relating to Charitable Gaming Licensing. Automated systems may be used for internal analytics and/or support. If you have any questions, please contact our Privacy Officer at privacy@aglc.ca or via mail: AGLC, 50 Corriveau Avenue, St. Albert, AB T8N 3T5.

AGLC Contact Information		
50 Corriveau Avenue St. Albert, Alberta T8N 3T5	Phone: 780-651-7600 Toll -Free 1-855-506-1066 Fax: 780-447-8911 or 447-8912	Website: aglc.ca Email: gaming.licensing@aglc.ca