

## Registration Application for Casino Advisor Examination

Application Date (Year/Month/Day)	Exam Date (Year/Month/Day)	Location
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### Examination Type

☐ Cash Cage
 ☐ Count Room
 ☐ Dual

Which type of Casino Facility do you plan to train in:
 ☐ Traditional
 ☐ Host First Nations

Are you currently registered as a gaming worker with AGLC?
 ☐ Yes, Registration # \_\_\_\_\_
 ☐ No

Surname (Please Print)
 First Name
 Middle Name (in full)

Other Alias(es)

Date of Birth (Year/Month/Day)
 ☐ Canadian Citizen
 ☐ Other (Describe)

Place of Birth (City/Town/Province/Country)

Mailing Address (Include Apt. # or Suite # if applicable)
 City/Town
 Province
 Postal Code

Contact Phone
 Email Address

☐ Same as mailing address

Home Address
 City/Town
 Province
 Postal Code

### THE FOLLOWING DOCUMENTATION MUST BE SUBMITTED WITH THE REGISTRATION APPLICATION

- ☐ Online or third party criminal records checks will NOT be accepted with the exception of Edmonton Police Service (EPS) [www.edmontonpolice.ca/CommunityPolicing/OperationalServices/PoliceInformationCheck](http://www.edmontonpolice.ca/CommunityPolicing/OperationalServices/PoliceInformationCheck) or Calgary Police Service (CPS) [www.calgary.ca/cps](http://www.calgary.ca/cps).
- ☐ Casino Advisor examination fee - \$100.00 (if paying by cheque or money order make payable to AGLC) per exam.

**I certify that:**

- All information provided as part of the application is truthful and complete.
- Any criminal charges or convictions will be reported to AGLC immediately.
- I authorize AGLC to undertake a criminal records check or inquire with any police agency to determine my eligibility to be registered as a gaming worker.
- I understand that a false statement or failure to meet AGLC conditions may result in my registration being refused or cancelled.

Applicant'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, AB T8N 3T5  
780-447-8600 or toll free at 1-800-272-8876

**Registrations Contact Information**

50 Corriveau Avenue

St. Albert, Alberta T8N 3T5

Phone: 780-651-7600 Ext. 8

Toll Free: 1-855-506-1066 Ext. 8

Website: [aglc.ca](http://aglc.ca)Email: [gaming.registrations@aglc.ca](mailto:gaming.registrations@aglc.ca)