

# LOTTERY LICENCE ORGANIZATION INFORMATION



Year: \_\_\_\_\_

**New Organization**  **Returning Organization**

**Organization Name:** \_\_\_\_\_

**Organization Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

Member in Charge: \_\_\_\_\_

Member in Charge: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Bank Account #: \_\_\_\_\_

Branch #: \_\_\_\_\_

Incorporation/Registered Charity # \_\_\_\_\_

Organization in existence since: \_\_\_\_\_

Number of bona fide members: \_\_\_\_\_

Membership requirements: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Organization aims and objectives: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Organizations year end date \_\_\_\_\_