



Gaming Services application - City of Toronto questionnaire

Office hours:
Monday to Friday (except holidays)
8:30 a.m. – 4:30 p.m.

Telephone: 416-392-7037
E-mail: lotterylicenses@toronto.ca
www.toronto.ca/gaming

Gaming Services
Toronto City Hall
100 Queen Street West, 1st Floor, North
Toronto, Ontario
M5H 2N2

THIS FORM MUST BE PRINTED AND FILLED OUT ON PAPER.

Eligible charities may be licensed by the City to hold gaming events such as bingos, raffles, bazaars, or the sale of break-open tickets, within certain prize limits. See the information package for each type of event or sale for eligibility requirements, prize limits and fees.

Organizations must submit to City of Toronto Gaming Services all fees, the appropriate form from the Alcohol and Gaming Commission of Ontario (AGCO) and this questionnaire, along with supporting documentation requested below.

Contact information

Would you like to pick up the licence at Toronto City Hall? If not, it will be mailed.

Yes No. Contact name and mailing address:

Contact name, telephone and e-mail for information regarding this application (if different from above):

About the organization

Registered name of organization as shown on letters patent or legal documentation

Operating name, if different

Business address

Telephone

E-mail

Fax

Website

Is the organization incorporated as a non-profit organization with the Ministry of Consumer & Business Services (Ontario)?

No Yes – Provide registration date and number:

Is the organization registered with Revenue Canada as a charity?

No Yes – Provide registration date and number:

How long has the organization been providing services?

Approximate total of members of the organization:

What category best describes the Organization?

- Arts and culture Sports Health and welfare Education
 Religious Relief of poverty Service club Community support
 Services to seniors Other (please specify):

Please list and describe all specific charitable programs and services delivered by the Organization and specific costs incurred (do not restate your mandate or mission statement):

Services	Costs
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

Does the organization currently manage and conduct any gaming event (lotteries) within the City of Toronto or other municipalities?

Yes No

If yes, please list type of gaming event and municipality

- Bingo
 Raffle*
 Bazaars*
 Break-open (Nevada)*

*Please include name and address of supplier registered under *Gaming Control Act, 1992*.

Describe the new proposed lottery budget and event:

Banking and financial information

For the purpose of lottery licensing, all organizations must have a lottery trust account. Please provide:

Name and address of bank:	Trust account number:
	Date opened:
Date of fiscal year-end:	Last date of filing:

Declaration of designated members in charge

All designated members in charge must be bona fide members of the organization and are required to complete this declaration:

We, as active, bona fide members of _____
(organization) hereby certify that as the designated members in charge of the lottery for which this application is made, will be responsible for the management and conduct of the lottery in accordance with the terms and conditions under which the lottery licence is issued. We, as bona fide members, have signing authority, hold a senior position with the organization and will be present at the event, if applicable.

Print name in full	
Title	
Other position(s) in organization	
Full home address (street name & number, city, province, postal code)	
Business phone	
Home phone	
E-mail	
Date & signature	
Signature	

Print name in full	
Title	
Other position(s) in organization	
Full home address (street name & number, city, province, postal code)	
Business phone	
Home phone	
E-mail	
Date & signature	
Signature	

Print name in full	
Title	
Other position(s) in organization	
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Home phone	
E-mail	
Date & signature	
Signature	