

## Organization Information

Organization Registered Name		Operating Name (if applicable)	
<b>Organization Address and Contact Information</b>			
Street Number	Street Name		Suite/Unit Number
City/Town		Province	Postal Code
<b>Mailing Address if Different from above</b>			
Street Number	Street Name		Suite/Unit Number
City/Town		Province	Postal Code
Organization Telephone Number		Organization Email	
Number of Members (if applicable)		Fiscal Year End Date	

## Contact Person Information

Contact Person (First, Last)	Position Title
Business Telephone Number	Business Mobile Number
Business Email Address	

## Registration Status

Is your organization registered as a charity? If yes, Charitable Registration No. & Date:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your organization have Letters Patent? If yes, Letters Patent No. & Date:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your organization's status as a registered charity or non-profit been revoked in the last two years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your organization amalgamated with another organization within the last two years? If yes, provide amalgamation agreement or contract.	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>PLEASE NOTE: You will be required to open a separate cGaming Business Bank Account if found eligible.</b>	
Signature	Date (yyyy-mm-dd)

# cGaming Eligibility Review Form

## Principal Officers of Record

Definition:

- **Principal Officer** is a person who has ultimate responsibility for implementing the decisions of the organization's governing body, or for supervising the management, administration or operation of the organization. They must be signing officers.

**MANDATORY: We as Principal Officers of the Organization:**

- Have read over the form, we have signing authority and decision making capability for the organization as per our position and role within the organization
- All information provided on this form is true and correct
- If the organization is granted approval for a CGaming Permit, we undertake to comply with all the [Policies and Standards for Charities](#) of any such permit issued

Principal Officer Name (First, Last)		Position Title	
Street Number	Street Name		Unit Number
City/Town	Province	Postal Code	
Business Telephone Number	Business Mobile Number	Business Email Address	
Signature			Date (yyyy-mm-dd)

Principal Officer Name (First, Last)		Position Title	
Street Number	Street Name		Unit Number
City/Town	Province	Postal Code	
Business Telephone Number	Business Mobile Number	Business Email Address	
Signature			Date (yyyy-mm-dd)

Principal Officer Name (First, Last)		Position Title	
Street Number	Street Name		Unit Number
City/Town	Province	Postal Code	
Business Telephone Number	Business Mobile Number	Business Email Address	
Signature			Date (yyyy-mm-dd)

# cGaming Eligibility Review Form

## Proposed Use of Proceeds

In accordance with your organization's **Letters Patent** (or **Supplementary Letters Patent**) in which your organization is incorporated, and consistent with your **By-Laws and Constitution**, please state the ongoing programs and services for which the organization proposes to use the cGaming funds. You may use a separate sheet if required:

**PROPOSED USE OF GAMING FUNDS (Please be specific as possible, i.e. Equipment, rental fees, facilitator fees, lifeguards, ice rentals).** To determine eligible use of proceeds, Gaming Services will reference the [cGaming Guidelines: Eligibility and Use of Proceeds](#).

Name of Program or Service Provided	Expenses related to direct delivery of program	Yearly Cost

If found eligible to participate in cGaming, you will be notified in writing within 30 business days of the receipt of your complete application. Incomplete applications will be returned to the organization and will not be processed.

Once deemed eligible, an organization may request to be placed at one of the cGaming Centres listed below. Please rank the organization's preferences by indicating below, from 1 to 3, with 1 being most preferred and 3 being the least preferred. Preference will be taken into consideration based on availability:

Delta Bingo & Gaming – St. Clair

Dolphin Gaming Centre

Rama Gaming – Toronto East

Mail completed application to:

**Gaming Services, 100 Queen St. W., 1<sup>st</sup> Floor N, Toronto, Ontario, M5H 2N**

If you have questions regarding your eligibility review, please contact Gaming Services at: (416) 392-7037 or at [lotterylicences@toronto.ca](mailto:lotterylicences@toronto.ca).