



QUESTIONNAIRE RESPECTING APPLICANTS FOR LOTTERY LICENCE

1. Registered Name of Organization (as shown on Governing Documents):

Operating Name, if different: _____

Business Address: _____

Telephone Number: _____

Fax No. _____

Email Address: _____

Website: _____

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

Yes No

Please provide registration date & number: _____

3. Is the Organization registered with Revenue Canada as a charity? Yes No

Please provide registration date & number: _____

4. How long has the Organization been providing services? _____

5. What category best describes the Organization?

Advancement of Education

Relief of Poverty

Health and Welfare

Advancement of Religion

Other Charitable Purposes Beneficial to the Community: (Please specify sub-category√)

_ Culture & Arts

_ Health & Welfare

_ Amateur Sports Organizations

_ Enhancement of Youth

_ Public Safety Programs

_ Community Service Organizations

6. Please list and describe the specific programs and services delivered by the Organization in the previous year and associated costs (do not restate your mandate or mission statement):

Services

Costs

1. _____ 1. _____

2. _____ 2. _____

3. _____ 3. _____

4. _____ 4. _____

5. _____ 5. _____

7. Approximate total number of members in the organization: _____

8. Date of fiscal year-end _____ Please indicate last day of filing _____ (date)

9. For the purpose of lottery licensing, all organizations must have a lottery trust account. Please complete the following information:

Name of Bank and Address: _____

Trust Account number: _____ Date Opened: _____

10. Please attach a copy of the following:

- Incorporation Papers (Letters Patent)
- Constitution and By-Laws
- Most recent Registered Charity Information Return & Public Information Return (as submitted to Canada Customs and Revenue Agency)
- Financial Statement for Previous Fiscal Year
- Current Listing of the Board of Directors

Designated Members in Charge of Lottery

All Designated Members in Charge of the Lottery must be bona fide members of the organization and are required to complete this form

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, and hold a senior position with the organization.

Print Name in Full	
Title	
Other Position(s) held in Organization	
Home Address	Number and Street: City and Province : Postal Code :
Phone Numbers	Business : Home :
Date	
Signature	

Print Name in Full	
Title	
Other Position(s) held in Organization	
Home Address	Number and Street: City and Province : Postal Code :
Phone Numbers	Business : Home :
Date	
Signature	

Print Name in Full	
Title	
Other Position(s) held in Organization	
Home Address	Number and Street: City and Province : Postal Code :
Phone Numbers	Business : Home :
Date	
Signature	

Names of additional volunteers : 1. _____ 5
 2. _____ 6
 3. _____ 7
 4. _____ 8