

Who is Eligible

Eligible religious, charitable and non-profit organizations may be licensed to conduct lotteries in Innisfil. An organization may be eligible if it:

- Has been in existence for at least one year.
- Has provided charitable community services with goals and activities that are consistent with the mandate of the organization for at least one year in Innisfil.
- Proposes to use the proceeds for charitable programs and services that directly benefit Innisfil and its residents.
- Assumes full responsibility for the conduct and management of its event.

An individual is not eligible for a lottery license.

Instructions

Applying for a lottery license is a **TWO STEP** process if your organization has not been licensed by the Town in the past two years:

Step 1 – Applying for an Eligibility Review

To apply for an eligibility review, an organization must submit to Customer Service:

- Lottery Licensing Eligibility Review Application
- Organization's constitution and/or by-laws, signed and dated.
- Letters Patent, if applicable.
- List of current Board of Directors showing name, position in the organization, address, phone number and email address.
- Membership list, if applicable.
- Brochures, pamphlets and any other background information describing programs and services delivered by the organization.
- Revenue Canada Notification of Charitable Designation, if applicable.
- Most recent documents filed with Revenue Canada (T3010), if the organization is registered as a charity under the Charities Accounting Act or Income Tax Act
- Operating budget for the current year and past year, including all sources of revenue and expenses.
- Most recent annual signed financial statement.

We will review your application and notify you in writing of your organization's eligibility to conduct a lottery. An eligibility review usually takes 5 business days to complete.

Step 2 – Applying for a Lottery License

To apply for a lottery license, an organization must submit to Customer Service:

- Application to manage and conduct the lottery and supporting documentation
- Lottery licensing fee is payable at the time of pick-up of the license.

^{**}Incomplete applications will be returned to the applicant.



Select	Lottery	<u>I ype</u>
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Contact Us

If you have any questions regarding your application, contact Customer Service

Address: Town of Innisfil – Customer Service

2101 Innisfil Beach Road Innisfil, ON L9S 1A1

Telephone: (705)-436-3740

Website: www.innisfil.ca/living/ourservices/lottery-license/

E-mail: inquiry@innisfil.ca

Hours:

Monday – Friday: 8:30 a.m. – 4:30 p.m. Saturday: 9:00 a.m. – 12:00 p.m.

Open late 2nd and 4th Wednesday's of the month 4:30 p.m. - 7:30 p.m.



Organization Details						
Registered name		Operating	Operating name (if applicable)			
Address (Business address – no P.O. Box)		Unit	City	Postal Code		
Mailing Address (if ap	plicable)	Unit	City	Postal Code		
Name of Bona Fide Member – Designated in charge (First, Last)		Organiza	Organization title/position			
Business phone	Cell phone	Home phon	е	Fax		
Email		Website				
Providing services since		Number of members				
Category that best describes the organization (check one)						
Arts and Culture Sports Education						
Health and Welfare ☐ Service Club ☐ Religious ☐						
Community Support Relief of Poverty						



Programs and/or Services Provided	
(Attach additional information if needed)	
Name of program or service	Yearly costs incurred
Name of program or service	Yearly costs incurred
Name of program or service	Yearly costs incurred
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Name of program or service	Yearly costs incurred
Name of program or convice	Voorly costs incurred
Name of program or service	Yearly costs incurred
Name of program or service	Yearly costs incurred

Proposed Use of Proceeds

Lottery revenues must be spent in a manner which provides a direct benefit to the residents of Innisfil and is consistent with the mandate of the organization. Explain in detail the proposed use of lottery proceeds. Attach additional pages if required.



Financial Details				
Name of organization's banking institution				
Fiscal year end date	Last date of filing (if applicable)			
Principal Officers of I]			
Registered name of or	ganization			
 We as principal officers of this organization declare: We have read over this application All information provided in this application is true and correct If eligible status for lottery licensing is granted, we undertake to comply with all the terms and conditions of any such license issued 				
Name of Principal Officer (First, Last)		Title/position in organization		
Other positions in organization (if applicable)				
Address		Unit	City	Postal Code
Business phone	Cell phone	Home pl	none	Fax
Signature		Date		



Name of Principal Officer (First, Last)		Title/position in organization			
Other positions in organization (if applicable)					
Address		Unit	City		Postal Code
Business phone	Cell phone	Home phor	Home phone		
Signature		Date			
		1			
Name of Bona Fide Member – Designated in charge (First, Last)		Title/position in organization			
Other positions in organization (if applicable)					
		•			
Address		Unit	City		Postal Code
Business phone	Cell phone	Home phone Fax		Fax	
Signature		Date			



Name of Bona Fide Member – Designated in charge (First, Last)		Title/position in organization			
Other positions in organization (if applicable)					
Address		Unit	City		Postal Code
Business phone	Cell phone	Home phone		Fax	
Signature		Date			