VILLAGE OF WORTH

APPLICATION FOR RAFFLE LICENSE

I/we, the undersigned, hereby make application for a license for a raffle to be held within the Village of Worth, in accordance with the provisions of Title 3, Chapter 25 of the Village of Worth Municipal Code governing the conduct of such raffle.

Name of Organization: _____

Address: _____

City, State, Zip: _____ Phone: _____

Type of Organization: **( ) Not for-Profit Organization in existence for a 5 year period**

( ) Non-Profit Fundraising Organization

( ) Charitable **( ) Educational** **( ) Religious**

( ) Veterans **( ) Labor** **( ) Business** **( ) Fraternal**

Has the organization been in existence longer than five (5) years? ( ) Yes ( ) No

Dates when raffle chances will be sold or issued: _____

The date, time, and location address at which winning chances will be determined:

Date: _____ Time: _____

Location Address: _____

Name of Raffle Manager: _____

Title in the Organization: _____

Address: _____

City, State, Zip: _____

E-mail Address: _____ Phone: _____

Each organization licensed to conduct raffles shall keep such records and shall handle receipts from the operation of such raffles as required in accordance with the Act. All raffle records will be maintained by the organization conducting the raffle for a minimum of three (3) years from the date of the raffle. The organization shall make available their records relating to operating of raffles for public inspection at reasonable times and places.

The undersigned swear or affirm that _____is Bona fide Not for-Profit Organization in existence for a 5 year period, Non-Profit Fundraising Organization Charitable, Educational, Religious, Veterans, Labor, Business, Fraternal Organization that operates without profit to its members. The undersigned certify that they have read the Municipal Code of the Village of Worth regarding raffles and are in compliance with all provisions. The undersigned certify that no person whose felony conviction will impair the person's ability to engage in the licensed position, is or has been a professional gambler or professional gambling promoter, or is not of good moral character. The undersigned hereby consent to criminal background checks to be conducted at the Village's discretion. The undersigned also certify that the information provided herein is true and correct and that he or she is authorized to sign this document on behalf of this organization. The undersigned further agree that, at the conclusion of the raffle, this organization will report to the Village of Worth its gross receipts, expenses and net proceeds and distribution of said net proceeds within thirty (30) days of drawing.

_____ _____

Signature of Presiding Officer Date Signature of Secretary Date

SUBSCRIBED and SWORN to before

me this _____day of _____, _____

_____

Notary Public

Seal:

FOR VILLAGE USE ONLY:

Date Village Received Fidelity Bond _____ Date if Waived _____

Date Filed _____ Date Approved _____

Date Village Received the Financial Report _____

Form can be emailed to bprice@villageofworth.com or dropped off at Village of Worth Village Hall, 7112 W. 111th Street, Worth, IL 60482

Revised January 17, 2023