

GAMBLING ACT 2005

**FORM TO ACCOMPANY APPLICATION FOR SMALL SOCIETY
LOTTERY REGISTRATION**



Name of Society _____

Promoter

The following person, who is a member of the Society, has been authorised in writing by the governing body of the Society to act as promoter of lotteries on behalf of the Society.
(please forward a copy of the minutes of the meeting certifying the above)

Name _____

Address _____

Daytime Telephone No _____

Certification of Returns

The following persons *, of full age, have been appointed in writing by the governing body of the Society to certify Returns relating to lotteries promoted on behalf of the Society.
(please forward a copy of the minutes of the meeting certifying the above)

Name _____

Address _____

Name _____

Address _____

*** Note the promoter must not be one of those persons.**

Date _____

Signed _____

Chairman / Treasurer / Secretary