



**GAMBLING ACT 2005**

**APPLICATION FORM FOR REGISTRATION OF NON-COMMERCIAL SOCIETY**

If you are completing this form by hand, please write legibly in block capitals using ink.

**SECTION A – Details of society applying for registration**

1. Name of society: .....
2. Address of local office: .....  
.....  
.....  
.....  
..... Postcode: .....
3. Telephone number of society: .....
4. Please state the purpose(s) for which the society is established and conducted: .....  
.....  
.....  
.....  
.....
5. If the society is a registered charity, please give the society's unique charity registration number:  
.....
6. Has the society held an operating licence under the Gambling Act 2005 in the period of five years ending with the date of this application? **Yes/No** (please delete)
7. If the answer to question 6 is "Yes", has the operating licence been revoked in the period of five years ending with the date of this application? **Yes/No** (please delete)
8. If the answer to question 7 is "Yes", please state the reasons for revocation and enclose a copy of the notice of revocation if one is available.  
.....  
.....  
.....  
.....

9. Has the society applied for and been refused an operating licence in the period of five years ending with the date of this application? **Yes/No** (Please delete)

**Section B – General Information about the person applying on behalf of society**

10. Name: .....

11. Capacity: .....

12. Address for correspondence: .....

.....

.....

.....Postcode: .....

13. Daytime telephone number: .....

14. Email address: .....

**Section C - Declaration**

Please complete the following declaration and checklist:

- a. I (full name) .....make this application on behalf of the society referred to in Section A and have authority to act on behalf of that society.
- b. enclose payment of the registration fee of £40.00.
- c. confirm that, to the best of my knowledge, the information contained in this application is true. I understand that it is an offence under Section 342 of the Gambling Act 2005 to give information which is false or misleading in, or in relation to this application.

Signature .....

Date .....

Position in Society ..... (e.g. Chairperson/Secretary/Treasurer)

**NOTE TO SOCIETIES APPLYING FOR REGISTRATION**

The application will be refused if in the period of five years ending with the date of the application:

- a. an Operating Licence held by the Society has been revoked under Section 119(1) of the Gambling Act 2005, or
- b. an application for an Operating Licence made by the Society has been refused.

The application may be refused if the Local Authority think that:

- a. the society is not a non-commercial society.
- b. a person who will or may be connected with the promotion of the lottery, has been convicted of a relevant offence, or
- c. information provided in or with the application is false or misleading.

This Council is under a duty to protect the public funds it administers and to this end may use the information you have provided on this form within this Council for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.



**COTSWOLD**  
District Council

## **Gambling Act 2005**

**Name of Society:** .....

**Address of Society:** .....

**Society's Aims and Objectives:** .....

**I have attached**

- a list of the Society's Patrons, Officers and if applicable branch offices
- a copy of the Society's constitution or terms of reference or if applicable a copy of the Charity Deed

**What scheme do you intend to run? i.e. 100 club, raffle etc.**

**Signed:** .....

**Dated:** .....

**Position in Society:** .....



**COTSWOLD**  
District Council

**GAMBLING ACT 2005  
DECLARATION**

**Name of Society:** .....

At a meeting of the above Society on .....

It was minuted that the people listed below are authorised to countersign the return by promoter forms under the Gambling Act 2005.

**Signed:** ..... **Dated:** .....  
(Chairman / Treasurer)

**Name:** (BLOCK CAPITALS) .....

**Authorised Society Members:**

**Name:** (BLOCK CAPITALS) .....

**Signature:** .....

**Name:** (BLOCK CAPITALS) .....

**Signature:** .....

**Name:** (BLOCK CAPITALS) .....

**Signature:** .....

**Name:** (BLOCK CAPITALS) .....

**Signature:** .....