**APPLICATION FOR PERMIT TO CONDUCT BINGO**

GAMING AND WAGERING COMMISSION ACT 1987

Section 95

Please print neatly in **BLOCK LETTERS** with a *black* pen only

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| Has the **Permit Holder** ever been issued with a Liquor Licence/Gaming Permit? **Yes** [ ]  **No** **[ ]** Has your **Organisation** ever been issued with a Liquor Licence/Gaming Permit? **Yes** **[ ]**  **No** **[ ]** Are the **Premises** where Bingo is to be conducted **approved** for playing Bingo? **Yes** **[ ]**  **No** **[ ]** If **Yes** please provide the **Certificate Number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Expiry date** If **No** the **Owner/Lessee** of the premises needs to complete an **Approval of Premises** form.(The form is available from this office or from our website [www.dlgsc.wa.gov.au](http://www.dlgsc.wa.gov.au) ) |

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| **ORGANISATION** *(Full Name of Organisation)*of P/Code *(Full Address of Organisation)* |

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| **PERMIT HOLDER**Title & Full Name: DOB ***(The permit holder must be 18 years or over and a member of the organisation)***of P/Code ***(Postal address of permit holder)***Tel: Daytime A/Hours Mobile Email:  |

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| **PERMIT HOLDER’S DECLARATION (Title and Full Name)**I nominated as permit holder for the conduct of bingo on behalf of the above organisation, declare that I am a member of the above organisation and I have read and agree to abide by the terms and conditions associated with the permit.Signature Date  |

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| **USE OF FUNDS**The net proceeds from all sessions of play will be used solely by the above organisation/club for the following purpose:-  **(General funds or general administration costs not acceptable - specific use must be stated)** |

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| **PREMISES**Bingo will be held at Address Are the premises licensed under the *Liquor Control Act 1988*? Yes [ ]  No [ ] If **Yes** Liquor Licence Number  |

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| **MULTIPLE PLAYING DETAILS**Bingo sessions to be held over the period to 6 months onlyBetween the hours of am/pm and am/pm on day. (Breaks **Yes** **[ ]  No****[ ]** )**(Please attach a separate sheet if you need any variations to the hours or the dates )** |

**OR**

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|  SINGLE PLAYING DATE ONLYHeld on (date) hours of am/pm to am/pm. (Breaks **Yes** **[ ]  No** **[ ]** ) |

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| ORGANISATION DECLARATIONThis bingo on behalf of  (Organisation Name)is being conducted with my knowledge and approval. (Signature of Authorised Officer of Beneficiary – Not Permit Holder) (Position Held)Dated this day of 20  |

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| **ASSOCIATION DETAILS**Is the Association affiliated with another body? Yes [ ]  No [ ] If **YES**, what is the name of other body? Does applicant Association have a constitution? Yes [ ]  No [ ] What are the aims and objects of the applicant body?   |

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| Is this organisation registered with Charitable Collections Advisory Committee? Yes [ ]  No [ ]  |

**LODGEMENT OF APPLICATION AND FEES**

1. Application fees are prescribed in Schedule 1 to the *Gaming and Wagering Commission Regulations 1988*. Please refer to Schedule 1 for a list of all application fees and other charges.
2. Additionally, a 1% per cent surcharge on gross proceeds per session is also payable.
3. Cheques should be made payable to the “**Gaming and Wagering Commission**” (cash must not be sent through the mail).
4. The application must be lodged at least **14 days prior to the commencement date**.

**UNLESS PREVIOUSLY SUBMITTED A CERTIFIED COPY OF THE CONSTITUTION OR RULES GOVERNING THE AFFAIRS OF THE ORGANISATION MUST BE SUBMITTED WITH APPLICATION.**

**PAYMENT DETAILS**

An invoice with detailed payment options will be provided once the application has been received.