TENDRING DISTRICT COUNCIL

SCHEDULE

APPLICATION FOR REGISTRATION OF NON-COMMERCIAL SOCIETY

This form is prescribed by regulation 3(1)(a) of the Small Society Lotteries (Registration of Non-Commercial Societies)Regulations 2007

If you are completing this form by hand, please write legibly in block capital using black ink. To: **Tendring District Council** Licensing Section Town Hall Station Road Clacton on Sea Essex CO15 1SE SECTION A - DETAILS OF SOCIETY APPLYING FOR REGISTRATION 1. Name of Society 2. Address (including postcode) of office or head office of society.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. Has the society held an operating licence under the Gambling Act 2005 in the period of five 6. years ending with the date of this application? Yes Nο 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 If the answer to question 6 is "Yes", has the operating licence been revoked in the period of five years ending with the date of this application?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

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	
10.	Does the society employ a person or body to promote all or part of your lotteries?	
	Yes No	
11.	If the answer to question 10 is "Yes", please state the name of the person or body.	
12.	Is this person or body licensed by the Gambling Commission as an External Lottery Manager?	
	Yes No	
NOTE: If a third part person or body is promoting a society lottery without a licence from the Gambling Commission they may be committing an offence under Section 258 of the Gambling Act 2005.		
SECTIO	ON B - GENERAL INFORMATION ABOUT PERSON APPLYING ON BEHALF OF SOCIETY	
10.	Name	
11.	Capacity	
12.	Address (including postcode)	
	Postcode	
13.	Daytime telephone number	

SECTION C - CONTACT DETAILS FOR CORRESPONDENCE ASSOCIATED WITH THIS APPLICATION	
14.	Please tick one box as appropriate to indicate address for correspondence in relation to this application.
	Address in Section A Address in Section B Address Below
	Address (including postcode)
	Email address (if the applicant is happy for correspondence in relation to this application to be sent via e-mail)
SECT	ION D - DECLARATION
15.	Please complete the following declaration and checklist:
l [full	name]
a.	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.
Signa	ature
Date	
Capa	ıcity
The a (a)	to societies applying for registration: application will be refused if in the period of five years ending with the date of the application: an operating licence held by the society has been revoked under section 119 (1) of the Gaming Act 2005, or
(b) The s	an application for an operating licence made by the society has been refused.
(a) (b) of a r	application may be refused if the local authority think that: the society is not a non-commercial society. a person who will or may be connected with the promotion of the lottery has been convicted elevant offence, or
(c)	information provided in or with the application is false or misleading.