# Monte Carlo

APPLICATION

Note: Only eligible charitable or religious organization can be issued a charitable gaming licence. Your organization must be approved for eligibility by the LGCA before you submit this application. If your organization has not held a charitable licence in the last three years, visit MyLGCA.ca to apply for eligibility.

- Allow six weeks for processing.
- Missing or incomplete information may result in a longer processing time.
- A fee of \$5 per game per day is payable with the submission of your application.

# **SECTION A: Contact Information**

1. Organization's Full Legal Name:

#### 2. Contact Details:

|                         | APPLICANT |
|-------------------------|-----------|
| Name                    |           |
| # and Street/P.O. Box # |           |
| City/Town               |           |
| Province                |           |
| Postal Code             |           |
| Phone                   |           |
| Email                   |           |

|                         | MONTE CARLO CHAIR |
|-------------------------|-------------------|
| Name                    |                   |
| # and Street/P.O. Box # |                   |
| City/Town               |                   |
| Province                |                   |
| Postal Code             |                   |
| Phone                   |                   |
| Email                   |                   |





# **SECTION B: Financial Information**

#### 3. Use of Profits:

How will the profits from this Monte Carlo be used? BE SPECIFIC. Include any donations to other charitable organizations. Attach a separate page, if needed.

1. \_\_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

#### 4. Banking Information:

#### Monte Carlo Bank Account Information:

A separate bank account must be used for deposit of all Monte Carlo revenue. All expenses and disbursements approved with this application must be paid from this account. Attach a copy of your most current bank statement for this account.

| Name of Financial Institution    |  |
|----------------------------------|--|
| Address of Financial Institution |  |
| Bank Account Number              |  |

#### 5. Estimated Expenses (excluding licence fees):

|                           | PROVIDER NAME (if applicable) | EXPENSES |
|---------------------------|-------------------------------|----------|
| Supplier/Service Provider |                               | \$       |
| Equipment Rental          |                               | \$       |
| Wages                     |                               | \$       |
| Advertising               |                               | \$       |
| Other                     |                               | \$       |
|                           | Total Expenses*               | \$       |

# **SECTION C: Monte Carlo Information**

#### 6. Event Location, Date and Time:

| EVENT DETAILS   |         |       |  |
|---|---------|-------|--|
| Name of location                                      |         |       |  |
| Address   |         |       |  |
| Location owned by                                     |         |       |  |
| Monte Carlo to be held in conjuction with what event? |         |       |  |
| Event dates (MM/DD/YYYY)                              | Start:  | End:  |  |
| Time  | Start:: | End:: |  |



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### 7. Event Specifics

| Number of blackjack tables (maximum of 4) | <br>Type of currency to be used |
|---|---------------------------------|
| Number and type of wheels                 | Silver/Coins                    |
| Money Wheel                               | <br>Chips                       |
| Crown and Anchor                          | <br>Play Money                  |
| Over and Under                            |                                 |
| Other (explain)                           |                                 |
|   |                                 |
|   |                                 |
| Total number of games                     |                                 |

## **SECTION D: Certification**

We, the undersigned, hereby certify on behalf of the organization that the information provided on this application is correct and true, and that we have read, understood and agree to abide by the <u>Monte Carlo</u> <u>Terms and Conditions</u>.

Check this box and type your name in the area labelled signature, if you want to submit your signature electronically.

| Print Name     | Signature                                  | Date (MM/DD/YYYY)                        |  |  |
|----------------|--|--|--|--|
|                | I acknowledge that I may have to           |  |  |  |
|                | confirm my identity and the auth           | confirm my identity and the authenticity |  |  |
|                | of this signature, should it be contested. |  |  |  |
| Position Title |  |  |  |  |

SUBMISSION INSTRUCTIONS

Please email, fax or mail this application to:

Email: gaminglicence@LGCAmb.ca Fax: 204-927-5385 or 1-866-999-6688 (Manitoba only toll-free fax)

Mailing address: LGCA - Charitable Services Department 1055 Milt Stegall Drive, Winnipeg, Manitoba, R3G 0Z6





#### **PRIVACY NOTICE**

The LGCA is collecting your personal information to conduct investigations for the purposes of licensing prospective and current licensees in Manitoba under The Liquor, Gaming and Cannabis Control Act (C.C.S.M. c. L153).

The LGCA is authorized to collect your personal information under subsections 36(1)(a) and (b) of The Freedom of Information and Protection of Privacy Act (C.C.S.M. c. F175), because the collection is authorized by The Liquor, Gaming and Cannabis Control Act and your personal information relates to and is necessary for the LGCA's background investigations. Your personal information will only be used by the LGCA to process your application, to assess your eligibility to receive and maintain a licence, and for enforcement purposes under The Liquor, Gaming and Cannabis Control Act.

Your personal information is protected by The Freedom of Information and Protection of Privacy Act. The LGCA cannot use or disclose your personal information for other purposes, unless you consent or the LGCA is authorized to do so by The Freedom of Information and Protection of Privacy Act.

If you have any questions or concerns about the LGCA's collection of your personal information, please contact the LGCA's Freedom of Information and Privacy Protection Coordinator at <u>FIPPAcoordinator@LGCAmb.ca</u>, or 204-927-5300 or 1-800-782-0363 (Manitoba only toll-free phone).



This document is available in alternate formats, upon request.

