



VILLAGE OF SHILOH
RAFFLE LICENSE APPLICATION

Date: ___/___/___

Fee: \$25.00

Applicant Name: _____ Applicant Address: _____
(Individual, Organization or Corporation)

Authorized Representative of Applicant: _____
(Name and Title/Position)

Date of Incorporation ___/___/___

Contact Information for Raffle Manager and Officers:

Table with 3 columns: Name of Raffle Manager, Address, Phone. It contains four rows of blank lines for entering contact information.

Raffle item(s) description: _____

Location(s) within the Village of Shiloh in which raffle chances, tickets and the like will be sold or issued: _____

Beginning date of raffle sales: ___/___/___ Ending date of raffle sales ___/___/___

The maximum price which may be charged for each chance issued or sold: \$_____

Date(s), time(s) and location(s) of determination of winning chance(s):

Date: ___/___/___ Time: ___:___ am/pm Location: _____
Date: ___/___/___ Time: ___:___ am/pm Location: _____
Date: ___/___/___ Time: ___:___ am/pm Location: _____

"We hereby affirm that the above named organization is a bona fide religious, charitable, labor, business, fraternal, educational or veterans organization which operates without profit to its members and which has been in existence continuously for a period of five (5) years immediately before making application for a license and which has had during that entire five (5) year period a bona fide membership engaged in carrying out its objectives."

"We agree to comply with all laws of the State, the United States, and the Village in the conduct of the raffle."

PRESIDING OFFICER

SECRETARY

APPROVED: _____

ROBERT L. WEILMUNSTER, MAYOR