

FOR OFFICE USE ONLY

Check # _____

Amount \$ _____



Application to Register A Game Night

MGCU - 5450

****The application (to include the rules for the game(s)), copies of all applicable contracts, committee acceptance letter and the registration fee must be received by the Gambling Control Unit at least ten business days prior to the Game Night requested****

Game Night: \$100 Once Annually or Once Within a Twelve-Month Period

Make check payable to Treasurer, State of Maine

Return the completed and signed application to:

**Department of Public Safety
Gambling Control Unit
Central Maine Commerce Center
87 State House Station
45 Commerce Drive, Suite 3
Augusta, Maine 04333-0087
(207) 626-3900 – Office
(207) 287-4356 – Fax**

1. For what game(s) are you registering (please indicate number of games adjacent the name of the game and attach the organization's / committee's rules for the game(s) requested to the application):

Table Games _____ Roulette _____ Craps _____ Big 6 Wheel _____

Other (Indicate Name of Game): _____

2. Organization Name: _____

Organization Number (NPO): _____ Federal Tax ID # (EIN): _____

Committee; Name Registered with Maine Ethics Commission: PAC PPC BQC
(Please provide a copy of Committee Acceptance Letter)

Committee Name: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

3. Current Officers:

NAME & TITLE	ADDRESS	CITY/ZIP	PHONE	DATE TERM EXPIRES
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NAME & TITLE	ADDRESS	CITY/ZIP	PHONE	DATE TERM EXPIRES
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NAME & TITLE	ADDRESS	CITY/ZIP	PHONE	DATE TERM EXPIRES
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NAME & TITLE	ADDRESS	CITY/ZIP	PHONE	DATE TERM EXPIRES
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4. Location where Game Night is to be conducted:

BUILDING ADDRESS CITY/ZIP

5. Person responsible for the conduct of the Game Night:

NAME DAYTIME PHONE & EVENING PHONE

E-Mail Address: _____

6. Check the day of the week you will be conducting Game Night:

Mon Tue Wed Thu Fri Sat Sun

7. What time do the doors open? _____ What time does the game(s) start? _____

8. Date of event: _____

9. Does the organization own all the equipment used in operating the Game Night? Yes No

If "NO", Attach a sheet of paper to this application explaining the circumstances under which the equipment was acquired. **Please write your organization name and number on the sheet.**

10. Has any current officer of this organization or association ever been convicted of or have any charges currently pending for violating the gambling or lottery laws of the United States or the State of Maine?

Yes No

If "YES" attach a sheet of paper to this application providing the person's name, address, and date and place of conviction or date and location of pending charge. **Please write your organization name and number on the sheet.**

11. Does the organization have any delinquent / outstanding Disposition of Funds Reports? Yes No

If "YES" include all reports with this application. If the reports are not included, this application is considered incomplete.

12. **Fair Association Only:** Attach a list of the names and home addresses of the persons operating or assisting in the registered activity. **Please write your organization name and number on the list.**

13. The following consent must be completed by the municipal officers of the city or town where the Game Night will take place unless a separate “Letter of Approval” is attached to this application.

Check here if you have attached a “Letter of Approval.” Letters that have an expiration date of greater than five years from the issue date will not be accepted by this office.

Municipal Consent to Register

The undersigned municipal officers of the City/Town of _____ hereby certify that we consent to the registration by _____ to operate Game Night in accordance with the provisions of 17 M.R.S.A. Chapter 62 and in accordance with the Rules promulgated by the State of Maine, Department of Public Safety, Gambling Control Unit governing the operation of Game Night.

Name: _____

Date: _____ Title: _____

Name: _____

Date: _____ Title: _____

Name: _____

Date: _____ Title: _____

Name: _____

Date: _____ Title: _____

14. The applicant agrees to obey Federal, State of Maine laws, and rules governing Game Night promulgated by the Department of Public Safety, Gambling Control Unit. The applicant warrants the truth of the foregoing statements on penalty of perjury.

Signed: _____

Print Name: _____ Title: _____

Date: _____ Age 18 or older: Yes No

NOTE: Ensure a copy of the Rules, Contracts, Committee Acceptance letter and MGCU-6400 shipment form if applicable are attached to the application.