Application for Registration of Non-Commercial Society Lottery

This form is prescribed by regulation 3(1)(a) of the Small lotteries (registration of Non-Commercial Societies) Regulations 2007. A small society wishing to register must apply to the licensing authority in whose area their principal office is located.

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. Email address: ................................................................................................................................................

5. Please state the purpose(s) for which the society is established and conducted:

........................................................................................................................................................................

........................................................................................................................................................................

........................................................................................................................................................................

........................................................................................................................................................................

6. If the society is a registered charity, please give the society’s unique charity registration number:

........................................................................................................................................................................

7. Has the society held an operating licence under the Gambling Act 2005 in the period of five years ending with the date of this application? Yes/No

8. If the answer to question 6 is ‘Yes’, has the operating licence been revoked in the period of five years ending with the date of this application?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

9. If the answer to question 7 is ‘Yes’, please state the reasons for revocation and enclose a copy of the notice of revocation of one is available:

........................................................................................................................................................................

........................................................................................................................................................................

........................................................................................................................................................................

........................................................................................................................................................................

10. 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
SECTION B - General information about person applying on behalf of society

11. Name: ............................................................................................................................

12. Position: ..........................................................................................................................

13. Address (including postcode) of office or head office of society: ...........................................

.............................................................................................................................................. Postcode: ..........................................

14. Daytime telephone number: ..................................................................................................

SECTION C - Contact details for correspondence associated with this application

15. 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): ..................................................................................................

.............................................................................................................................................. Postcode: ..........................................

Telephone Number: .............................................................................................................

Email address: .....................................................................................................................

Privacy Policy

Here at St. Helens Council we take your privacy seriously. We will only use your personal information to administer your application and provide the products and services you have requested from us.

From time to time we may need to contact you with details of the service or information we require from you and we will do this using the contact information you provided on your application form. This can either be by post, email, telephone or text message.

The Council has a duty to protect the public and we implement a number of security measures to maintain the safety of your personal information. Please be aware however that the information you provide on this application may be shared with other public bodies where required, such as Council Departments and Government Services, which may be used for the prevention of fraud or other serious offences.

If you require a copy of the data we hold or believe it to be inaccurate please contact the Council’s Data Protection Officer by email on dataprotection@sthelens.gov.uk.

Any further information held by the Council about individuals will be held securely and in compliance with the law. Information will not be held for longer than required and will be disposed of securely. Further information regarding retention periods is available on the Council’s website at https://www.sthelens.gov.uk/Licensing.
SECTION D - Declaration

15. Please complete the following declaration and checklist:

I (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. Cheques made out to ‘St.Helens Council’

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.

Signature: .......................................................................................................................... Date: ........................................

Position: .........................................................................................................................................................

Note to societies applying for registration:

The application will be refused if in the period of five years ending with the date of the application:

a) an operating licence held by the society has been revoked under section 119(1) of the Gambling Act 2005, or;

b) an application for an operating licence made by the society has been refused.

The application may be refused if the local authority think that:

a) the society is not a non-commercial society;

b) a person who will or may be connected with the promotion of the lottery has been convicted of a relevant offence, or;

c) information provided in or with the application is false or misleading.

Completed application forms should be returned to:

Licensing and Land Charges
Wesley House, Corporation Street, St.Helens WA10 1HF
Tel: 01744 676770
Email: generallicensing@sthelens.gov.uk