



Name of Organization: \_\_\_\_\_

Games of Chance Identification Number: \_\_\_\_\_ Date: \_\_\_\_\_

SCHEDULE 1: OFFICERS AND DIRECTORS

List names, addresses and dates of birth of all officers. If organization is a corporation, or an incorporated or unincorporated association, list officers and directors.

Table with 6 columns: TITLE, NAME, DATE OF BIRTH, ADDRESS, CITY, ZIP. Includes 6 rows of horizontal lines for data entry.

Attach additional sheet if necessary.

SCHEDULE 2: MEMBERS IN CHARGE OF GAMES (MUST BE AT LEAST FOUR MEMBERS OF APPLICANT ORGANIZATION)

Table with 6 columns: NAME, YEARS OF MEMBERSHIP, DATE OF BIRTH, ADDRESS, CITY, ZIP. Includes 5 rows of horizontal lines for data entry.

**SCHEDULE 3: AUXILIARY/AFFILIATE ORGANIZATIONS ASSISTING AT GAMES**  
 (MAXIMUM OF 2 AUXILIARIES/AFFILIATES. EACH AUXILIARY/AFFILIATE LISTED MUST HAVE ITS OWN ID NUMBER)

NAME OF AUXILIARY/AFFILIATE	GAMES OF CHANCE ID NUMBER
_____	_____
_____	_____

**SCHEDULE 4: ASSISTANTS TO MEMBERS IN CHARGE OF GAMES**  
 List all members of applicant organization and members of authorized affiliates and auxiliary who will assist with games.

MEMBER NAME	YEARS OF MEMBERSHIP	DATE OF BIRTH	ADDRESS	CITY	ZIP
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____
_____	_____	____/____/____	_____	_____	_____