

ALCOHOL LAW ENFORCEMENT BRANCH -GAMING LICENSING SECTION
3320 GARNER ROAD
RALEIGH, NORTH CAROLINA 27610
919-733-4060

◆GL-1 GAME NIGHT SPONSOR LICENSE APPLICATION◆

CONDITIONS OF LICENSE

Exempt organization – An organization that has been in continuous existence for at least five years and that is exempt from taxation under section 501(c)(3), 501(c)(4), 501(c)(5), or 501(c)(6) of the United States Internal Revenue Code

Game night – A specific event at which games of chance are played and prizes are awarded by raffle and that is sponsored by or on behalf of an exempt organization for the primary purpose of raising funds for the exempt organization or is sponsored by an employer or trade association pursuant to G.S. 14-309.34.

Prizes – No games at a game night event may be played for cash or a cash prize. Prizes shall be awarded only through a raffle. Participants may exchange chips, markers, or tokens from the game night event for raffle tickets. For purposes of this subsection, the term "cash prize" includes gift cards that are issued by a financial institution or its operating subsidiary and that are usable at multiple unaffiliated sellers of goods or services.

Costs – The cost of the prizes and expenses to operate the game night event, excluding the cost of food, beverages, and entertainment, shall not exceed the proceeds derived from the event. If the exempt organization hires a game night vendor for the event, payment shall be by fixed fee.

This application and \$100 fee must be submitted 30 days in advance of an event

1. Name of Exempt Organization or Trade Association: _____

2. Administrative Address: Street _____

City: _____ County: _____ State: ___ Zip Code: _____

3. Mailing Address if different from above: Street _____

City: _____ County: _____ State: ___ Zip Code: _____

Select One:

4a. **Exempt organization:** Federal Tax I.D. Number _____

EXEMPT ORGANIZATION MUST INCLUDE TAX DOCUMENTS WITH APPLICATION. A copy of the determination letters from the IRS (1-877-829-5500) **and** the North Carolina Department of Revenue (1-877-252-3052) indicating that the organization is exempt and stating the section under which the exemption is granted is required.

4b. **Employer or** **Trade Association:** Number of employees or members _____

Only employers and Trade Associations with 25 or more employees or members are authorized to hold game night events.

5. Point of contact for event: Name _____ Telephone: (____) _____ - _____

6. Facility information, state below the location of the game night event:

Business name/ABC Outlet Trade Name: _____ ABC File #: _____

Address: Street _____

City: _____ County: _____ State: ____ Zip Code: _____

7. Date, Time and Duration of event: _____

8. Vendor Information. Name and address of the person, firm or corporation who will operate the devices:

Business Name: _____ Vendor License Number: _____

Address: Street _____

City: _____ County: _____ State: ____ Zip Code: _____

Point of contact of Vendor: Name _____ Telephone: (____) _____ - _____

Vendor relationship, if any, to organization holding game night event: _____

9. Please select the types of device(s) that will be used at your event: Roulette Blackjack Poker Craps
Simulated horse race Merchandise wheel of fortune

CERTIFICATE

I certify that all of the information provided in this application is true and accurate to the best of my knowledge and belief, that I have read and understand the foregoing conditions and was provided a copy of the gaming statutes for the State of North Carolina.

_____ Signature and title of officer of organization _____ Date _____
Print name of individual applying for license

Telephone number of organization _____ Daytime telephone number _____ County, NC

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she signed the foregoing document

Name(s) of principal(s)

Date _____
(Official Seal)

Official Signature of Notary

_____, Notary Public
Notary's printed or typed name

My commission expires _____