

Town of Bolton
222 Bolton Center Road
Bolton, CT 06043
860-649-8066
www.boltonct.gov



**APPLICATION FOR REGISTRATION
AMUSEMENT AND RECREATION
BINGO**

INSTRUCTIONS:

- 1. Print or type.
- 2. Mail application to: Town of Bolton, 222 Bolton Center Rd., Bolton CT 06043
- 3. An Identification Number will be issued upon approval.

IDENTIFICATION NUMBER (To be assigned)

NAME OF ORGANIZATION _____ **TELEPHONE NUMBER** _____

STREET ADDRESS (No. and Street) _____ **(City or Town)** _____ **(State)** _____ **(Zip Code)** _____

MAILING ADDRESS (Name) _____ **(No. and Street)** _____ **(City or Town)** _____ **(State)** _____ **(Zip Code)** _____

Does your organization consist of members sixty (60) years of age or older? YES NO

INDICATE DAY(S) OF WEEK AND HOURS OF BINGO OPERATION

1 **SUNDAY** From: _____ am _____ pm To: _____ am _____ pm 5 **THURSDAY** From: _____ am _____ pm To: _____ am _____ pm
2 **MONDAY** From: _____ am _____ pm To: _____ am _____ pm 6 **FRIDAY** From: _____ am _____ pm To: _____ am _____ pm
3 **TUESDAY** From: _____ am _____ pm To: _____ am _____ pm 7 **SATURDAY** From: _____ am _____ pm To: _____ am _____ pm
4 **WEDNESDAY** From: _____ am _____ pm To: _____ am _____ pm

ADDRESS WHERE BINGO WILL BE PLAYED (No. and Street) _____ **(City or Town)** _____ **(State)** _____ **(Zip Code)** _____

I, the undersigned ranking officer of subject organization, do hereby state that all Bingo sessions operated by subject organization under this registration will be conducted in compliance with Connecticut General Statutes and with all Administrative Regulations concerning Amusement and Recreation Bingo.

SIGNED (Ranking Officer) _____
PRINTED NAME of Ranking Officer _____
DATE (Mo., Day, Yr.) _____

OATH

Personally appeared the signer of the foregoing statement and made oath before me to the matter contained herein.

SIGNED (Notary Public) _____ MY COMMISSION EXPIRES: _____ DATE (Mo., Day, Yr.) _____

ATTEST

To the best of my knowledge and belief, information contained in this application is:

- True and correct and subject organization qualifies for and **SHOULD** be issued a registration and an Identification Number.
- Not true or correct and subject organization **SHOULD NOT** be issued a registration and an Identification Number.

COMMENTS _____

SIGNED (Chief of Police or First Selectman) _____ DATE (Mo., Day, Yr.) _____

APPLICATION FOR AMUSEMENT AND RECREATION BINGO REGISTRATION IS APPROVED _____ DATE (Mo., Day, Yr.) _____

