

## NATIONAL LOTTERIES COMMISSION

(Established under the Lotteries Act 57 of 1997)

## APPLICATION BY A SOCIETY FOR REGISTRATION WITH THE NATIONAL LOTTERIES COMMISSION UNDER THE LOTTERIES ACT 57 OF 1997

When completed this form should be sent with the documents listed on page 4 to:

National Lotteries Commission 333 Grosvenor Street Hatfield Gardens, Block D Hatfield Pretoria 0083 compenforce@nlcsa.org.za

You are reminded that under no circumstances should steps be taken to promote lotteries (i.e. by advertising and/or placing tickets on sale) under the scheme submitted to the Commission, until notification has been received that the society has been registered.

1.	Name and address of society applying to register with the Commission:	Name: Address: (Including Postcode)  Fax: E-mail (where applicable)
2.	Full name, address and telephone number of the person with whom the Commission may communicate about this application:	Name: Address: (Including postcode)

Telephone No.:

3.	Purposes for which the Society is established a conducted as laid down its constitution or rule	and n in						
4.	Does the Society have society lottery?	adequate :	financial ı	resour	ces to conduct	а	YES	NO
	If "yes", please provide	proof the	reof.					
5.	Name and address of Sauditor or bookkeeper:  Details of the society's  Name of account:		Name: Contact P Address: (including postcode) Tel. No.:	erson:				
	Bank	A/C	No.	Bı	anch Code		Address	3
7.	Has the society previous Lotteries Commission?	-	registered	with t	he National		Yes	No
8.	Has the Society's previ application for registra to the Commission bee	tion n?			Refused	Revoked	Sus	pended

9.	Has the Society ever received a notice of non-compliance	Yes	No
	from the Commission?	168	NO

10. If an external lottery manager will be employed to run lotteries on behalf of the Society, the name, address and telephone number of the person or organization concerned:

Name:	Registration No.:
Address: (including postcode)	
Telephone No.	

11. The following declaration must be signed by at least two (2) Directors of the Society.

## **DECLARATION**

We certify that, to the best of our knowledge and belief, the information we have given in
this application is complete and correct. We understand that the Commission requires
that it be informed immediately if any of the information supplied in this application form
changes at a later date.

(Sign	ned):(Signed):		
(Full	l Name):(Full Name):		
(Des	ignation):(Designation):		
(Dat	e):(Date):		
i. ii. iii. iv. v.	DOCUMENTS TO BE SUPPLIED WITH THIS APPLICATION  A copy of the Society's rules or constitution.  The names and addresses of the Management Committee of the Society.  A certified copy of the minutes of the meeting or a resolution where the decision was taken to apply for Commission registration should be submitted.  Certificate of Registration as a Non-Profit Organisation.  A statement pertaining to the society's financial state of affairs and business (Annual		
٧.	Financial Statements).		
OFFICE USE ONLY			
App:	lication Fee: R Date:		
Reg	. No. Issued: Date:		