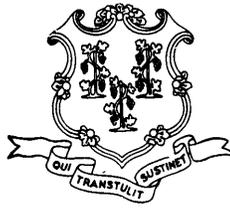


STATE OF CONNECTICUT  
 DEPARTMENT OF CONSUMER PROTECTION  
 License Services/Charitable Games  
 165 Capitol Avenue  
 Hartford, CT 06106  
 Email: [DCP.GamingCharitable@CT.gov](mailto:DCP.GamingCharitable@CT.gov)  
 Web site: [www.ct.gov/dcp](http://www.ct.gov/dcp)



APPLICATION FOR REGISTRATION  
 AMUSEMENT AND RECREATION BINGO  
 FOR PARENT TEACHER ASSOCIATIONS

CGB-9 REV. 06/11

**INSTRUCTIONS:**

1. Print or type. **Attach payment of the \$80.00 registration fee, payable to the Treasurer ST. of CT.**
2. Mail application to **165 Capitol Ave., Hartford, CT 06106.**
3. The Department of Consumer Protection will assign an Identification Number.

<b>TO: DEPARTMENT OF CONSUMER PROTECTION</b>	IDENTIFICATION NUMBER <i>(To be assigned by Consumer Protection)</i>
NAME OF ORGANIZATION	TELEPHONE NUMBER
STREET ADDRESS <i>(No. and Street)</i>	<i>(City or Town)</i> <i>(State)</i> <i>(Zip Code)</i>
MAILING ADDRESS <i>(Name)</i>	<i>(No. and Street)</i> <i>(City or Town)</i> <i>(State)</i> <i>(Zip Code)</i>

LIST OF OFFICERS OF THE SPONSORING ORGANIZATION			
NAME <i>(Last, First, Middle)</i>	TITLE	NAME <i>(Last, First, Middle)</i>	TITLE
1.		4.	
2.		5.	
3.		6.	

I, the undersigned ranking officer of subject organization, do hereby state that all Bin go sessions operated by subject organization under this registration will be conducted in compliance with the Connecticut General Statutes and with all Administrative Regulations concerning Recreational Bingo for Parent Teacher Associations.	SIGNED <i>(Ranking Officer)</i>  PRINTED NAME of Ranking Officer  DATE <i>(Mo., Day, Yr.)</i>
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OATH		
Personally appeared the signer of the foregoing statement and made oath before me to the matter contained herein.		
SIGNED <i>(Notary Public)</i>	MY COMMISSION EXPIRES:	DATE <i>(Mo., Day, Yr.)</i>

ATTEST
<b>To the best of my knowledge and belief, information contained in this application is:</b>
<input type="checkbox"/> True and correct and subject organization qualifies for and <b>SHOULD</b> be issued a registration and an Identification Number.
<input type="checkbox"/> Not true or correct and subject organization <b>SHOULD NOT</b> be issued a registration and an Identification Number.

COMMENTS	
SIGNED <i>(Chief of Police or First Selectman)</i>	DATE <i>(Mo., Day, Yr.)</i>
<b>APPLICATION FOR REGISTRATION AMUSEMENT &amp; RECREATION BINGO FOR A PARENT TEACHER ASSOCIATION IS APPROVED</b>	DATE <i>(Mo., Day, Yr.)</i>