



290 Evergreen Drive · Vernon Hills, IL 60061-2999 · 847-367-3700

APPLICATION FOR RAFFLE LICENSE

DATE: \_\_\_\_\_ IF NON-PROFIT, DATE OF CHARTER: \_\_\_\_\_

NAME OF ORGANIZATION: \_\_\_\_\_

LIST OF OFFICER/AGENTS, NAME: \_\_\_\_\_

(Please attach a separate sheet if more than one officer/agent with all the below information)

ADDRESS,CITY,STATE,ZIP CODE: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ (EMAIL): \_\_\_\_\_

\*\*FOR PROFIT AGENCIES ARE SUBJECT TO BACK GROUND CHECKS AND SSN WILL BE REQUIRED

HAVE ANY OF THE OFFICERS/AGENTS LISTED ABOVE BEEN CONVICTED OF A FELONY? IF YES, PLEASE EXPLAIN AND DATE OF OCCURRENCE: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

HAVE ANY OF THE OFFICERS LISTED ABOVE BEEN A PROFESSIONAL GAMBLER OR GAMBLING PROMOTER? \_\_\_\_\_ IF YES, PLEASE GIVE NAME PARTICULARS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

SPECIFIC AREA (S) WITHIN THE VILLAGE OF VERNON HILLS IN, WHICH THE RAFFLE CHANCES WILL BE SOLD OR ISSUED: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

TERM PERIOD DURING WHICH RAFFLES OR CHANCES WILL BE SOLD OR ISSUED: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

TIME OF DETERMINATION OF WINNING CHANCE: \_\_\_\_\_

LOCATION AT WHICH WINNING CHANCES WILL BE DETERMINED: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

DO YOU HEREBY ATTEST TO THE NOT-FOR-PROFIT CHARACTER OF YOUR ORGANIZATION/EVENT? \_\_\_\_\_

\_\_\_\_\_  
PRESIDING OFFICER/AGENT

SUBSCRIBED AND SWORN TO ME  
ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC