



Jersey Gambling Commission

GAMBLING (JERSEY) LAW 2012
CHARITABLE CLUB OR SOCIETY REGISTRATION

PART 2 (ARTICLE 11)

**FORM OF APPLICATION FOR A CHARITABLE CLUB OR SOCIETY
REGISTRATION**

Please complete in BLOCK CAPITALS and then return this completed form to:

Jersey Gambling Commission, 4th Floor, Osprey House,
5-7 Old Street, St. Helier, Jersey, JE2 3RG.



Name of club/society:

Address of club/society:

Purposes of club/society:
(charitable, social, sporting, etc)

JFSC Non-Profit Organisation number:
(if applicable)

Number of members:

Promoter Name and Residential Address (required):

Telephone/Mobile (Required):

Email (required):

Schedule of Events
Under 'type' list raffle / lottery / bingo etc

Name of Event & Venue	Gambling Type	Prize Value	Date & Time



Club/Society Declaration

I _____ being a duly authorised person of the above-mentioned club/society, hereby authorise the applicant/promoter to undertake the events listed within this application on behalf of the aforementioned club/society.

Signature:

Date:

Promoter Declaration

I _____ being duly authorised by the above club/society, and in accordance with the Gambling (Charitable and Membership Gambling Services) (Jersey) Regulations 2012, apply for a registration to conduct the gambling listed in the Schedule of Events for the period ending on the last day of the applicable year.

The Jersey Gambling Commission must be informed and take account of any convictions by the applicant/promoter, as such, the applicant must make a declaration to the effect that they have never been convicted or found guilty of an offence in any Court of Law (including Honorary Police Enquiries, Juvenile Court or Court Martial) and that they do not have a case pending. **Please note that the Rehabilitation of Offenders (Exceptions) (Jersey) Regulations 2002 applies and that all convictions must therefore be declared.** All details may be checked via the Police. In case that there is a conviction, the applicant/promoter must declare it in writing to the Jersey Gambling Commission.

I _____, declare that I have not been convicted of any of the offences other than those declared. I further declare that I will inform the Jersey Gambling Commission immediately should any information come into my possession that materially impacts upon this declaration.

Signature:

Date:

Data Protection

The Commission requires data regarding applicants (including lead executives and beneficiaries, where necessary) for the purposes set out in the Gambling Commission (Jersey) Law 2010 and the Gambling (Jersey) Law 2012. As a competent authority listed in Schedule 1 of the Data Protection (Jersey) Law 2018, the Commission will primarily collect and process data and special category data necessary for the exercise of its public functions.

The Commission has produced a Privacy Policy for users and an Information Note. These are available on the website at the following link - <https://www.jgc.je/data-protection>. Please read them carefully.

Notes to Applicants



The Application Fee is £20. Please pay by bank transfer if possible

The completed application form and any attachments should be bound/stapled as a single document and be forwarded with an application fee of £20:

Jersey Gambling Commission
4th Floor, Osprey House
5-7 Old Street
St. Helier
Jersey, JE2 3RG

NOTE: The Commissions account for bank transfers is HSBC Sort Code 40-25-34 Account Number 52474700 (Provide the society name as reference). Any cheques should be made payable to the JERSEY GAMBLING COMMISSION.

The principal purpose of seeking the information required by this Application form is to provide core factual details, thereby enabling:

- Preliminary investigations in order to ascertain the full scope of its investigations; and
- Identify where further information will need to be requested and/or required.

Additional information may be sought by the Jersey Gambling Commission which may result in a visit to the premises or a meeting with the applicant.

If any details set out on this Application form change prior to the determination of this Application, you must notify the Jersey Gambling Commission in writing as soon as reasonably practicable.

Use BLOCK CAPITALS.

All dates should be in the form of Day / Month / Year (DD / MM / YYYY).

Answer every question, using N/A or NIL where applicable.

Use additional sheets as necessary, cross-referencing against the relevant question the additional sheet(s) on which the answer is to be found.

Application processing will not commence until all initial requested documentation is received.

If you require any assistance or would like to discuss any part of the application form, please contact the Jersey Gambling Commission on +44 (01534) 828540.

Please number, date and sign any additional attached pages to the application form.