Wallingford Police Department 135 North Main Street Wallingford, CT 06492 (203)294-2810



APPLICATION FOR REGISTRATION AMUSEMENT AND RECREATION BINGO FOR PARENT TEACHER ASSOCIATIONS

INSTRUCTIONS:

IS APPROVED

- 1. Print or type. Attach payment of the \$80.00 registration fee, payable to: WALLINGFORD POLICE DEPARTMENT
- 2. The completed application and fee must be mailed to: Wallingford Police Department
- 3. An Identification Number will be issued upon approval.

		IDENTIFICA	TION	NUMBER (To be assigned)		
TO: Wallingford Police Department						
NAME OF ORGANIZATION			TELEPHONE NUMBER			MBER
STREET ADDRESS (No. and Street)		(City or Town)		n) (State)		(Zip Code)
MAILING ADDRESS (Name)	(No. and Street)			(City or Town)	(State)	(Zip Code)
LIST OF OFFICERS OF THE SPONSORING ORGANIZATION						
NAME (Last, First, Middle)	TITLE	NAME (Last, First, Middle)		ME (Last, First, Middle)	TITLE	
1.		4.				
2.		5.				
Z		5.				
3.		6.				
SIGNED (Ranking Officer)						
I, the undersigned ranking officer of subject organization, do hereby state						
that all Bingo sessions operated by subject organization und			der this PRINTED NAME of Ranking		r	
registration will be conducted in compliance with the Connecticut Statutes and with all Administrative Regulations concerning Recru						
Bingo for Parent Teacher Associations.			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	t organization SHOULD	NUI De	ISS	sued a registration and	an identific	ation Number.
SIGNED (Chief of Police or First Selectman)			DATE (Mo., Day, Yr.)		ay, Yr.)	
APPLICATION FOR REGISTRATION AMUSEN	MENT & DATE (M	o., Day, Yr.)				
RECREATION BINGO FOR A PARENT TEACHER ASSOCIATION						