



CITY OF ANN ARBOR  
CHARITABLE GAMING LICENSE  
APPLICATION FOR CITY COUNCIL RESOLUTION

Date: \_\_\_\_\_

Please Return to:  
City Clerk's Office  
301 E. Huron St.  
Ann Arbor, Mi 48104

Official Name of Organization: \_\_\_\_\_

is hereby requesting that it be recognized as a nonprofit organization, operating in the City of Ann Arbor,  
for the purpose of obtaining a charitable gaming license.

Address of Organization (**must be within the City limits of Ann Arbor**)      City      Zip

Contact Person: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

(A copy of the approved Council resolution will be sent to this address.)

Does your organization have a website? YES / NO    Website address: \_\_\_\_\_

Describe what your organization does, or write your mission statement below.

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

Location of Event: \_\_\_\_\_

Type of Event (e.g. poker tournament, raffle, etc.): \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_

**\*Please attach a copy of paperwork indicating 501(c)(3) status with this application.**