CASINO EVENT PERMIT APPLICATION

Department of Permits, Approvals and Inspections
Miscellaneous Permits and Licenses
111 West Chesapeake Avenue Room 114
Towson, Maryland 21204
410-887-3616

Date Applied _____ **Fee: $140.00**

APPLICATIONS MUST BE SUBMITTED A MINIMUM OF 14 DAYS PRIOR TO THE CASINO EVENT DATE.

- **Casino Event – "Casino Event" means an event that includes card games or roulette games (dice games are prohibited) with or with out other games of chance. (For information on "other games of chance" see Annotated Code of MD – Criminal Law: Title 13, Subtitle 1, 2, 6)**
- **Only bona fide religious, fraternal, civic (includes bona fide hunting, social, and sporting organizations), volunteer fire, veterans, veteran's hospital, amateur athletic, or charitable groups, organizations, or bona fide charitable corporations that spend, in Baltimore County, a majority of the net proceeds from the casino event to benefit: religious purposes; fraternal purposes; civic purposes; volunteer fire operations; purposes that benefit veterans; veteran's hospital purposes; purposes related to amateur athletics; or charitable purposes, in Baltimore County, shall be eligible to sponsor a Casino Event and to obtain a Casino Event Permit.**
- **Written proof of a sponsoring organization's eligibility for a Casino Event Permit must be provided by all first-time applicants. Periodically applicants will be requested to submit updated proof of eligibility. Examples: IRS Determination Letter, IRS Affirmation Letter, Articles of Incorporation (Nonprofit), Tax Exemption Card.**
- **Only members of the sponsoring organization shall manage a casino event.**
- **An organization that obtains a Casino Event Permit shall ensure that an individual or group of individuals does not benefit financially or receive any of the proceeds of a gaming event for personal use or benefit.**
- **A Casino Event Permit is NOT TRANSFERABLE.**

Sponsoring Organization Name_____ Telephone No. _____

Sponsoring Organization Address_____
(Include City, State and Zip Code)

Mailing Address for Sponsoring Organization _____
(If different than the Sponsoring Organization's address.)

Sponsoring Organization is what Type of Qualified Bona Fide Charitable Organization: (circle all that apply)

Religious Organization Fraternal Organization Civic Organization Hunting Organization Social Organization Sporting Organization

Volunteer Fire Company Veterans Organization Other Qualified Charitable Organization (be specific) _____

CASINO EVENT:

Date(s): From_____ To_____ Beginning Time: _____ AM / PM Ending Time: _____ AM / PM Expected Attendance_____

Event Location Name_____ Telephone No. _____

Event Location Address_____
(Include City, State and Zip Code)

CERTIFICATION OF THE MEMBER WHO HAS THE POWER TO BIND THE SPONSORING ORGANIZATION BY CONTRACT AND IS RESPONSIBLE FOR THE CASINO EVENT DESCRIBED ABOVE.

I hereby certify, under penalty of law, that I possess the power to bind the above sponsoring organization by legal contract, I am responsible for the Casino Event described above, that I have reviewed the requirements contained in the 3 pages of this application, that the information contained therein is true and correct and that the organization obtaining this Casino Event Permit, will spend the greater part of the net proceeds of this gaming event for charitable purposes in Baltimore County. I further understand that any person that violates the Annotated Code of Maryland: Criminal Law Title 12 Section 12-103 and Title 13, Section 13-603 through 13-605: Casino Events, is guilty of a misdemeanor and on conviction is subject to up to one year imprisonment and/or a fine of up to $1,000.00 or both.

Responsible Member's Name_____ Member's Title _____

Member's Daytime Telephone No. _____ Member's Evening Telephone No. _____

Member's Address_____
(Include City, State and Zip Code)

Responsible Member's Signature_____ Date _____

OFFICE USE ONLY

Casino Permit No._____ Cash Receipt Date_____ Cash Receipt No._____ Fee Paid_____

Date Issued_____ Date Received Financial Statement_____ Data Entered _____ Initials_____

MEMBER/GAME OPERATOR'S INFORMATION

MEMBERS OF THE SPONSORING ORGANIZATION:

- **shall manage the casino event personally;**
- **shall conduct/operate all games personally;**
- **who will operate the gaming table(s) shall be at least 21 years of age;**
- **who will operate the gaming table(s) are to be listed below, including name, address, telephone number, and membership date, which must have been a minimum of 1 year prior to the casino event**

MEMBER / GAME OPERATOR'S NAME AND ADDRESS	TELEPHONE NO.	IS 21 YEARS OF AGE OR OLDER:		MEMBERSHIP DATE
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	
		YES	**NO**	

GAMES TO BE PLAYED AT THE CASINO EVENT

Note:

- **ONLY MEMBERS MAY OPERATE THE GAMES DURING THE CASINO EVENT, but Member/Game Operators MAY BE TAUGHT, by gaming device owners/vendors or "professionals", TO RUN THE GAMES.**
- **List, below, all games of chance to be played at the Casino Event.**
- **Indicated, below, the total number of each type of gaming table to be used at this Casino Event.**

Gaming Device(s) Owner's Name_____ Telephone No. _____

TYPE OF GAME TO BE PLAYED **Dice games and slot machines are prohibited!!!** (Attach a separate page for additional prizes.)	NUMBER OF "TABLES" FOR THIS TYPE OF GAME
ROULETTE WHEEL(s):	
BLACKJACK TABLE(s):	
OTHER GAME(s): (be specific)	
RAFFLE(s)/CHANCE BOOK: (Indicate type(s) of raffle)	
PADDLE WHEEL(s)/WHEEL OF FORTUNE: (Indicate type(s) of wheels)	
OTHER GAME(s) OF CHANCE: (be specific)	

PRIZE TO BE AWARDED AT THE CASINO EVENT

List all prizes of merchandise to be awarded at the Casino Event.
Cash Prizes are Prohibited!!!
(Attach a separate page for additional prizes.)

TYPE OF MERCHANDISE TO BE AWARDED (PROHIBITED: Cash prizes and certificates that can be readily converted to cash.)	FAIR MARKET "$" VALUE FOR THIS MERCHANDISE (Prize fair market value must not exceed $1,000.00 per prize.)