



Indigenous Gaming Regulators

BINGO LOTTERY ADDENDUM REQUEST

Licence Number: _____ Expiry Date: _____

Organization's Name: _____

Mailing address

P.O. Box or Street Address

First Nation, City or Town

Province

Postal Code

Bingo Hall: _____

Additional Dates (chronological order) *see reverse if more room is needed	Event (matinee, evening late night)	Office use
Cancelled Dates		

Contact Person: _____
(Print name)
(Signature)
(Date)

Residence Telephone

Business Telephone

Hall Official: _____
(Print name)
(Signature)
(Date)

In the case of an emergency request, complete the following for the organization which has cancelled:

Licence Number: _____ Organization's Name: _____

Reason for cancellation: _____

To avoid delay, ensure this form is fully completed. Allow a minimum of ten (10) working days for processing.

Mail or fax request to: **Licensing Department**
Indigenous Gaming Regulators Inc.
Suite 400-203 Packham Avenue
Saskatoon, SK S7N 4K5
Fax: (306) 477-4449

For office use only		
Date:		
Officer:	Entered:	

