APPLICATION FORM FOR REGISTRATION OF NON-COMMERCIAL SOCIETY

If you are completing this form by hand, please write legibly in block capitals using ink.

To:

LICENSING SERVICES
ENVIRONMENTAL HEALTH DEPARTMENT
TOWN Hall
LANCASTER ROAD
PRESTON
PR1 2RL



SECTION A – Details of society applying for registration 1. Name of society:
Address (including postcode) of office or head office of society:
3. Telephone number of society:
4. Please state the purpose(s) for which the society is established and conducted:
5. If the society is a registered charity, please give the society's unique charity registration number:
6. Has the society held an operating licence under the Gambling Act 2005 in the period of five years ending with the date of this application? Yes \Box No \Box
7. If the answer to question 6 is 'Yes', has the operating licence been revoked in the period of five years ending with the date of this application? Yes \Box No \Box
8. If the answer to question 7 is 'Yes', please state the reasons for revocation and enclose a copy of the notice of revocation if one is available
9. Has the society applied for and been refused an operating licence in the period of five years ending with the date of this application? Yes \square No \square

Page 1 of 3

SECTION B – General information about person applying on behalf of society
10. Name:
11. Capacity:
12. Address (including postcode):
13. Daytime telephone number:
SECTION C – Contact details for correspondence associated with this application
14. Please tick one box as appropriate to indicate address for correspondence in relation to this application:
Address in section A ☐ Address in section B ☐ Address below ☐
Address (including postcode):
Telephone number:
Email address (if the applicant is happy for correspondence in relation to this application to be sent via e-mail):

Page 2 of 3

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(c) information provided in or with the application is false or misleading.

convicted of a relevant offence, or

Page 3 of 3