



Charitable Bingo Division

Texas Application for FIRST TIME Registry of Approved Bingo Workers

B-AP-170 (Rev. 9/13)

FOR TLC USE ONLY

Amount Paid \$ _____

Postmark Date _____

PLEASE PRINT LEGIBLY OR TYPE - MUST USE BLACK INK

FOR SUBMISSION

For mail: Charitable Bingo Operations Division, Texas Lottery Commission, PO Box 16630, Austin, TX 78761-6630 Via Fax: (512) 344-5142. FOR ASSISTANCE in completing this application, please call 1-800-BINGO-77 (1-800-246-4677) or visit our website at www.txbingo.org.

GENERAL INSTRUCTIONS

- The information requested below is necessary to conduct a criminal history background investigation which is authorized under the Bingo Enabling Act, Occupations Code, Chapter 2001.
- A person will not be listed on the Registry if the person has been convicted of criminal fraud or a gambling related offense.**
- Any changes to information contained on this application must be submitted to the Commission in writing or by filing Schedule N-3 Notice of Change for Registered Worker within 30 days of the change.
- If approved, a person will remain on the Registry for a period of three years from the date approved by the Commission. It is the responsibility of the registered person to reapply on or before their expiration date in order to remain on the Registry. All persons listed on the Registry and their expiration date can be confirmed at **txbingo.org**.
- NOTE:** If you reside outside of Texas, a Federal Bureau of Investigation or Texas Department of Public Safety fingerprint card must accompany this application.

PROVISIONAL EMPLOYMENT INSTRUCTIONS

- If you are employed as an operator, manager, cashier, usher, caller or salesperson on a provisional basis while awaiting the results of a background check by the Commission, check the Provisional Employment checkbox in item K and complete the playing location information requested in items L through O.
- A bingo chairperson or bookkeeper is not eligible for provisional employment. They must be listed on the Registry before they may begin working in their position.
- A provisional employee must immediately stop working if: 1) after 14 days they are not listed on the registry if the individual is a resident of this state; 2) after 45-days they are not listed on the registry and the individual is not a resident of this state and submits a fingerprint card for a background investigation; and 3) found to be disqualified on the basis of the background investigation.

APPLICANT INFORMATION

A. _____
Name (LAST, FIRST, MIDDLE INITIAL)

B. _____ **C.** _____ State _____
Social Security Number Driver's License Number

D. _____
Home Address (Street Address, P.O. Box or Rural Route)

City State ZIP Code **E.** _____
Phone Number (Area Code & Number)

F. _____ **G.** M F **H.** _____ **I.** _____
Race Gender Date of Birth (Month, Day, Year) E-mail Address (optional)

J. _____
Enter the mailing address that registry approval and your Worker Registry Identification Cards should be sent to if different from your home address (Street Address, P.O. Box or Rural Route)

City State ZIP Code

PROVISIONAL EMPLOYMENT

K. Yes, I am working on a provisional employment basis. (If "no," go to Statement of Responsibility)

L. _____ Taxpayer Number _____
Employing Organization Name

M. _____
Name of Bingo Hall

N. _____ City _____ State _____ ZIP Code _____
Bingo Hall Address

O. _____ Bingo Hall Fax Number _____
Bingo Hall Phone Number

REGISTRY FEE

A check or money order for \$25.00 payable to the State of Texas Comptroller's Office must be submitted with this application.

STATEMENT OF RESPONSIBILITY PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING BY SIGNING THE SPACE PROVIDED

- I declare that I have not been convicted of criminal fraud or gambling related offense.
- I declare that all information contained on this application is true and complete.
- I am aware that I may not be involved with the conduct of bingo in Texas until I receive notification that I am listed on the Registry from the Commission, unless provisionally employed.
- I am aware I must notify the Commission of any changes to information contained on this application within 30 days of the change.
- I will abide by the provisions of the Bingo Enabling Act and Charitable Bingo Administrative Rules.

Exceptions: _____

sign here ▶ _____
Applicant's Signature Print Name Date