

CHARITY NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

**BONA FIDE MEMBER LIST (Please list names in Alphabetical Order)**

NAME	POSITION	ADDRESS/EMAIL ADDRESS	SIGNATURE

Personal information on this form is collected under the authority of the *Municipal Freedom of Information and Protection of Privacy Act* and will be used to determine eligibility for lottery licensing. Questions about this collection of personal information should be directed to the City Clerk, 200 McIntyre Street East, North Bay (705) 474-0626 ext. 2510.