



**APPLICATION FOR LICENSE TO CONDUCT RAFFLES**  
**Email Completed Application to forms@longgroveil.gov**

1. Name of Organization/Charity: Woodlawn Middle School PTO  
 Address: 6362 Gilmer Rd  
Long Grove IL 60047  
 501C3 Registration Number 36-4419832 | E99339481

2. Organization Representative: Elizabeth Owens  
 3. Telephone Number of Representative: 224-430-6637

4. Type of Organization  
 Religious  Charitable  Labor  Educational   
 Business  Fraternal  Veterans  Governmental

5. Date and location in which raffle chances will be sold and raffle drawing will occur:

|    | <u>Raffle Date</u> | <u>Raffle Location</u>        | <u>Drawing Date</u> | <u>Drawing Location</u> |
|----|--------------------|-------------------------------|---------------------|-------------------------|
| 1. | <u>10/25/23</u>    | <u>Woodlawn Middle School</u> | <u>10/25/23</u>     | <u>Woodlawn</u>         |
| 2. | <u>3/13/24</u>     | <u>Woodlawn Middle School</u> | <u>3/13/24</u>      | <u>Woodlawn</u>         |
| 3. | _____              | _____                         | _____               | _____                   |
| 4. | _____              | _____                         | _____               | _____                   |

6. Please answer the following yes or no questions:

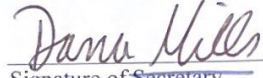
|  | Yes      | No       |
|--|----------|----------|
| a. Has the organization been in existence longer than 5 years?                                   | <u>X</u> | _____    |
| b. Does the aggregate retail value of prizes exceed \$100,000?                                   | _____    | <u>X</u> |
| c. Does the maximum retail value of each prize exceed \$50,000?                                  | _____    | <u>X</u> |
| d. Will the maximum price of a raffle ticket exceed \$500?                                       | _____    | <u>X</u> |
| e. Will you be seeking a waiver of the \$25 license fee because all proceeds will go to charity? | <u>X</u> | _____    |

Other reasons explain: \_\_\_\_\_  
 \_\_\_\_\_

The undersigned affirms that he/she is an authorized representative of the sponsor organization, that the statements made herein are true and correct to the best of his/her knowledge; and that he/she will be responsible for the conduct of the raffle in accordance with the provisions of the laws of the State of Illinois and the Village of Long Grove governing the conduct of raffles.

  
\_\_\_\_\_  
Signature of Organization Officer

9/12/2023  
Date

  
\_\_\_\_\_  
Signature of Secretary  
*President*

9/14/23  
Date

Approved by the Village of Long Grove:

\_\_\_\_\_  
Signature of Village President

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Village Clerk

\_\_\_\_\_  
Date

This Raffle License Application will be presented to the Village of Long Grove Board for approval. The day after the Board meeting, an email will be sent to the organization confirming the raffle has been approved.

04-2022