

Charitable Bingo Operations Division Renewal for Bingo Worker Registry

WHO MUST SUBMIT THIS FORM

This form must be completed by a registered worker who currently holds a valid worker registry badge and must renew the badge prior to the expiration date.

FORM SUBMISSION

Postal Delivery: Texas Lottery Commission, Charitable Bingo Operations Division, PO Box 16630, Austin, TX 78761-6630

Courier Delivery: Texas Lottery Commission, Charitable Bingo Operations Division, 1801 N. Congress Ave., Austin TX, 78701 FAX: 1-512-344-5142

FOR ASSISTANCE in completing this form, please call 1-800-BINGO-77 (1-800-246-4677) or visit our website at txbingo.org.

GENERAL INSTRUCTIONS

- Use black or blue ink.
- 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. All fields must be completed and legible.
- A person who has been convicted of criminal fraud or a gambling related offense will not be listed on the Registry.
- If approved, a person will remain on the Registry for an additional three (3) years past the end date of their most recent registry inclusion.
- Any changes to information contained on this form must be submitted to the Commission in writing or by filing Notice of Change for Registered Worker FORMID 48 within thirty (30) days of the change.
- All persons listed on the Registry and their expiration date can be confirmed at txbingo.org.
- This form must be signed by the applicant.
- Application will be returned if not complete.

Name (LAST, FIRST, MIDDLE INITIAL)						Current Registry Number		
Social Security Nun	nber	c.	iver's License Nun	nber. Texas ID Ca	rd Number			State
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ome Address (Str	eet Address, PO Box, or Rural F	toute. Do not give direction	ns, i.e., 5 miles nor	rth of I-20) L ZIP Code		E. [mber (Area Code & N	umber)

Military Spouses: If it has been 3 years or more since last verification, proof of current status as a Spouse of a Military Member is required. Please submit a notarized document verifying you are still married to a Military Service Member.

STATEMENT OF RESPONSIBILITY

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

1. I certify that all the information in this application is true and complete.

- 2. I understand that I must notify the Commission of any changes to information contained on this form within 30 days of the change.
- 3. I will abide by all provisions of Bingo Enabling Act and Charitable Bingo Administrative Rules.
- 4. I understand that if approved, I must reapply on or before my Registry expiration date in order to remain on the Registry.