



Thank you so much for expressing interest in conducting a raffle to benefit the SWOSU Foundation. Your thoughtfulness means so much to the university and the students it serves.

Raffles are *very* complicated to conduct and require a significant amount of time and resources. A tremendous amount of planning and calculation is required before ticket sales can even commence to ensure compliance with all applicable laws and regulations.

Please review the attached application thoroughly. We encourage you to make an appointment to come by Burton House and discuss your raffle proposal before moving forward. Again, thank you so very much for your wish to help SWOSU students succeed!

**SWOSU Foundation, Inc.**  
**580-774-3267**

# APPLICATION FOR CONDUCTING OF RAFFLES

## PAGE ONE OF THREE

This form must be completed & filed with the SWOSU Foundation, Inc., located at Burton House, 100 Campus Drive, Weatherford OK 73096, at least thirty (30) days prior to the date indicated for the commencement of raffle ticket sales.

Date of Application Submission: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date Range of Ticket Sales: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

NO TICKETS MAY BE SOLD MORE THAN 180 DAYS BEFORE THE DATE OF THE DRAWING **INITIAL OF APPLICANT GROUP OFFICIAL:**

Date of Drawing: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

NO TICKETS MAY BE SOLD AFTER THE DRAWING **INITIAL OF APPLICANT GROUP OFFICIAL:**

Location of Drawing: \_\_\_\_\_

Name of Drawing Location Coordinator: \_\_\_\_\_

*"By affixing my signature below I affirm that I have authority to grant permission of usage of the drawing location specified in this form for the purposes of holding the raffle requested in this form. I also agree to indemnify the SWOSU Foundation, Inc. for any liability, expenses, or damages incurred as a result of the SWOSU Foundation, Inc.'s sponsorship of this raffle."*

**SIGNATURE of Drawing Location Coordinator** \_\_\_\_\_

**DATE:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Applicant Group Name: \_\_\_\_\_

Applicant Group Fund Number: \_\_\_\_\_  
(This is the fund the raffle will benefit)

Applicant Group Official: \_\_\_\_\_  
(Must Be Listed as Signatory for Applicant Group Fund)

Applicant Group Official Phone: \_\_\_\_\_

Applicant Group Official E-Mail: \_\_\_\_\_

Applicant Group Official Address: \_\_\_\_\_

Applicant Group Point-of-Contact (POC): \_\_\_\_\_

Applicant Group POC Phone & E-Mail: \_\_\_\_\_

*"By affixing my signature below I affirm that I accept responsibility for conducting & reporting on the raffle requested in this application. I understand that I am responsible for monitoring our group's compliance with the laws & ordinances established by the City of Weatherford, the County of Custer, the State of Oklahoma, & the United States of America & with the rules & guidelines communicated to me by the SWOSU Foundation, Inc. Additionally, I understand that it is my responsibility to arrange for the production of raffle tickets, to forward all raffle receipts to the SWOSU Foundation, Inc. before 5:00 p.m. daily, to maintain accurate & complete records of income & expenditures, to assure that all tickets sold are secure & are included in the vessel from which the drawing will occur, to issue refunds to all ticket purchasers should the raffle be cancelled, to compile & distribute a list of prize winners to those who request it, and to file a full Raffle Completion report within seven (7) days of the completion of the raffle. Finally, I agree to indemnify the SWOSU Foundation, Inc. for any liability, expenses, or damages incurred as a result of the SWOSU Foundation, Inc.'s sponsorship of this raffle. I understand that there is a \$50.00 administrative fee, which must accompany this raffle application. Also, I agree to remit an amount equal to all expenses associated with the raffle to the SWOSU Foundation, Inc. within seven (7) days of completion of the raffle."*

**SIGNATURE of Applicant Group Official:** \_\_\_\_\_

**DATE:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

# APPLICATION FOR CONDUCTING OF RAFFLES

## PAGE TWO OF THREE

Prizes to be Awarded (All prizes to be awarded must be listed & all prizes must be awarded):

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Ticket Salespersons (All salespersons must be listed & all salespersons must be volunteers):

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Suggested Donation Level: \$\_\_\_\_.\_\_\_\_

### **PLEASE INCLUDE A DRAFT OF THE RAFFLE TICKET WITH THIS APPLICATION**

**RAFFLE TICKET CHECKLIST:** Each raffle ticket must contain each of the following elements:

- The word "Raffle"
- Description of Major Prize(s)
- Date, Time, & Place of Drawing
- Suggested Donation Level
- A statement regarding whether the holder must be present to win
- Name of Raffle Conductor (SWOSU Foundation, Inc.)
- Detachable Stub with Ticket Number & Purchaser Information
- Tickets must be consecutively numbered

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**SIGNATURE of Applicant Group Official:**

**DATE:**

\_\_\_\_\_  
\_\_\_\_/\_\_\_\_/\_\_\_\_

# APPLICATION FOR CONDUCTING OF RAFFLES

## PAGE THREE OF THREE

**NOTIFICATIONS:**

- As a 501 (c) (3) nonprofit entity the SWOSU Foundation, Inc. is permitted to conduct raffles as regulated by the State of Oklahoma and the United States of America. Raffles conducted outside the SWOSU Foundation, Inc.'s purview will not be recognized by the SWOSU Foundation, Inc. and may be considered illegal by local, state, or federal authorities. **INITIAL OF APPLICANT GROUP OFFICIAL:**
- The SWOSU Foundation, Inc. shall be the sole holder of the vessel from which the ticket shall be held and all tickets to be included in the drawing shall be deposited with the SWOSU Foundation, Inc. before 5:00 p.m. daily or on the next business day. **INITIAL OF APPLICANT GROUP OFFICIAL:**
- All proceeds from the sale of raffle tickets must be deposited with the SWOSU Foundation, Inc. before 5:00 p.m. daily or on the next business day. **INITIAL OF APPLICANT GROUP OFFICIAL:**
- The winning raffle ticket stub, along with all losing stubs and all unsold raffle tickets, must be submitted to the SWOSU Foundation, Inc. immediately following the drawing. **INITIAL OF APPLICANT GROUP OFFICIAL:**
- The SWOSU Foundation, Inc. reserves the right to utilize the proceeds of any approved raffle to pay any local, state, or federal taxes or any fees associated with the conducting of said raffle. **INITIAL OF APPLICANT GROUP OFFICIAL:**
- The Applicant Group Official for any approved raffle must file with the SWOSU Foundation a Raffle Completion Report no later than seven (7) calendar days from the date of the drawing. This must note the hours worked per volunteer as well as any information not documented in this form including deviations from the planned raffle, problems and issues that arose, etc. **INITIAL OF APPLICANT GROUP OFFICIAL:**

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**SIGNATURE of Applicant Group Official:** \_\_\_\_\_

**DATE:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

<b>SWOSU Foundation, Inc. Use Only</b>	
This application is:	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED
_____	_____ / ____ / ____
Executive Director, SWOSU Foundation, Inc.	Date
_____	_____ / ____ / ____
Trustees Chair, SWOSU Foundation, Inc.	Date
_____	_____ / ____ / ____
Legal Counsel, SWOSU Foundation, Inc.	Date