

# Town of Hampton



## RAFFLE PERMIT

Organization's Name: \_\_\_\_\_

Contract Person: \_\_\_\_\_

Contact Person Address: \_\_\_\_\_

Contact Person Telephone Number: \_\_\_\_\_

Contact Person E-Mail: \_\_\_\_\_

Date(s) of Raffle Drawings:\* \_\_\_\_\_

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

Items to be Raffled: \_\_\_\_\_

Raffle Proceeds to Benefit: \_\_\_\_\_

Date Approved: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Board of Selectmen

\* Please note: The permit shall expire at the time of the drawing and/or one year from the date of issuance, if conducting more than one raffle. Each Raffle drawing date expires after the drawing of the Raffle. The permit, if issued, shall not be transferable.