

**TOWN OF WYTHEVILLE  
RAFFLE PERMIT EVENT APPLICATION**

Date \_\_\_\_\_

A. Application to conduct raffle(s) is hereby made by:

ORGANIZATION NAME \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

ADDRESS \_\_\_\_\_

CONTACT NUMBER \_\_\_\_\_

NAME OF EVENT \_\_\_\_\_

B. This event is being requested to start on:

MONTH \_\_\_\_\_, DAY \_\_\_\_\_, YEAR \_\_\_\_\_

C. Has the organization been designated a 501(c)(3) organization for three (3) years or more?

\_\_\_\_\_ Yes, the organization has held a 501(c)(3) designation for three (3) years or more. Please attach 501(c)(3) certificate.

\_\_\_\_\_ No, the organization is not eligible for a 501(c)(3) designation or has not held the designation for three (3) or more years. **If no, your organization is not eligible for a raffle permit.**

D. SIGNED \_\_\_\_\_

TITLE \_\_\_\_\_

**Please return to:  
Sherry Corvin, Town Clerk  
Town of Wytheville  
P.O. Box 533  
Wytheville, Virginia 24382  
sherryc@wytheville.org**