



State of Michigan Millionaire Party (Charity Poker) License
Information Form

Name of Organization/Club Participating: _____

Primary Contact: _____ Phone: _____

Dates of Participation: _____

Name of Establishment: _____

Establishment Contact Name: _____ Phone: _____

Establishment Location: _____

Purpose of Fundraiser: _____

Funds Held With Foundation YES _____ NO _____

Signature of Principal: _____

Please attach a copy of your approved Michigan license and return to the Rochester Community Schools Foundation office: 501 W. University, Rochester, MI 48307; interoffice to the Administration Center c/o the Foundation; or fax to 248-726-3192 one week prior to your event.

Questions? Please call the RCS Foundation at 248-726-3190

Thank you.