



# ST. CHARLES POLICE DEPARTMENT

## CHARITABLE SOLICITATION REGISTRATION APPLICATION

Note: Solicitation in any intersection in the City of St. Charles is permitted for charitable organizations who are participating in statewide fundraisers only as dictated by: (625 ILCS 5/11-1006) (c) Illinois Vehicle Code.

OrganizationName: \_\_\_\_\_

Organization Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

1. Name, address, and copy of Driver's License or State ID of Representative of Organization submitting request and responsible for solicitation:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

2. Dates and time of day solicitation will be conducted: \_\_\_\_\_  
\_\_\_\_\_

3. Describe the geographic area within the City where solicitation shall be conducted:  
(For example: South of Route 64, east of 5<sup>th</sup> Avenue)

\_\_\_\_\_

4. Charitable Solicitation Registration **must include** a written statement of recent date issued by the Attorney General of Illinois that the charitable organization has complied with the provision of 225 ILSC 460/1 et seq. or a written statement by the Attorney General of exemption under 225 ILC.

5. Names and address of each person who will engage in charitable solicitation in the City. Please attach clear, legible copies of driver's licenses to this application.

Full Name and Complete Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date Submitted: \_\_\_\_\_