



NATIONAL LOTTERIES AUTHORITY
Sales Agent Application Form

APPLICANT'S PERSONAL INFORMATION:

Name of Applicant: _____
Home Address: _____
Home Telephone #: _____
Mobile Phone #: _____
E-mail Address: _____

APPLICANT'S BUSINESS INFORMATION:

Name of Business: _____
Business Address: _____
Business Phone #: _____
Type of Business: _____
No. of Employees: _____
Business Hours:

Sundays: _____ - _____

Mondays: _____ - _____

Tuesdays: _____ - _____

Wednesdays: _____ - _____

Thursdays: _____ - _____

Fridays: _____ - _____

Saturdays: _____ - _____

<p>Date:</p> <p>_____</p> <p>Applicant's Signature:</p> <p>_____</p>
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<p>NLA Rep.:</p> <p>_____</p>
