

**SKILL GAME REGISTRATION STATEMENT FORM**

In accordance with 3 VAC 5-80-50 of the code of Virginia, no later than July 7, 2020, each operator or distributor shall file a registration statement with the Virginia Alcoholic Beverage Control Authority. Failure to file the registration statement by this date, shall result in the barring of any such games not registered. Any such game not included in the registration statement shall be considered an illegal gambling device.

**DISTRIBUTOR INFORMATION:**

DISTRIBUTOR COMPANY NAME:	
ADDRESS:	
CITY/COUNTY:	
ZIP CODE:	
STATE:	
PHONE NUMBER:	

TOTAL NUMBER OF SKILL GAMES DISTRIBUTED:	
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**APPLICANT INFORMATION:**

APPLICANT NAME (LAST, FIRST, MIDDLE):	
DATE OF BIRTH:	
SOCIAL SECURITY NUMBER:	
ADDRESS:	
CITY COUNTY:	
ZIP CODE:	
STATE:	
PRIMARY CONTACT NUMBER:	
ALTERNATE CONTACT NUMBER:	
EMAIL ADDRESS:	

I swear (or affirm) that this form has been reviewed and understood by me, and to the best of my knowledge and belief, is complete and accurate acknowledgement pursuant to the ALCOHOLIC BEVERAGE CONTROL ACT and regulations of the Virginia Alcoholic Beverage Control Authority. I also acknowledge that any skill machine exceeding the registered number shall be deemed an illegal gambling device and may result in the loss of the Authority issued retail license to sell or offer alcoholic beverages for my retail customer, as well as a \$25,000 civil penalty per machine for me, the distributor, in accordance with 3 VAC 5-80-70 of the Code of Virginia.

APPLICANT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_