



Latitude at Hilton Head Association Resident Charter Club Application

Resident Name: _____ Phone: _____

Address: _____ Email: _____

Which of the following are you applying for: _____ Charter Club _____ Update of Charter Club

Name of Club: _____

Club Purpose: _____

Facility Space Requested: _____

Desired Time & Frequency of Club Meetings: _____

Total Number of Interested Club Members (Min of 10 Required): _____

Roster & Contact Information for Interim Club Leaders: *(Note: The Initial roster will comprise the Club's Interim Executive Board. Once a Club has been approved for charter, a new slate of candidates must be proposed and elected by the membership.)*

Charter Clubs Only	Name	E-Mail & Phone
President:		
Vice President:		
Secretary:		
Treasurer:		

By-Laws: Please complete and attach a copy of the Club's By-Laws prior to Submittal of this Application to Latitude at Hilton Head Association. Please allow for up to 14 days for an approval of your charter club. You will be notified by a member of the Lifestyle Team regarding the acceptance or denial of the Charter Club or if revisions are needed. We will do our best to accommodate your request for days, times and frequency. Space is granted to charter clubs, not guaranteed.

By signing below, you and all members of the charter club agree to follow and adhere to the governing documents of Latitude at Hilton Head Association, including but not limited to the Charter Club and Interest Group Rules and Regulations, which can be found on the Association website: www.lmhhoa.com.

Submit the application by email to annie.white@fsresidential.com or mary.ward@fstresidential.com or deliver in person to the Lifestyle Team.

Submitted By (Name & Signature of Interim Officer): Print _____

Signature: _____ **Date:** _____

For Association Use Only

_____ **Approved Conditions: Manager Signature:** _____ **Date:** _____

_____ **Denied: Management Signature:** _____ **Date:** _____

Notes: _____