

Latitude at Hilton Head Association

**Resident Charter Club Application** 

Resident Name:	Phone:
Address:	Email:
Which of the following apply: Initial Charter Club Upd	ate of Charter Club
Name of Club:	
Club Purpose:	
Facility Space Requested:	
Desired Time & Frequency of Club Meetings:	

## Total Number of Charter Club Members (Min of 15 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 Board candidates must be proposed and elected by the club 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 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.

Roster of initial members with interest. (To include additional members, please attach a second page with their names to this sheet.)

| Name of Club Member |
|---------------------|---------------------|---------------------|---------------------|---------------------|
| 1.                  | 4.                  | 7.                  | 10.                 | 13.                 |
| 2.                  | 5.                  | 8.                  | 11.                 | 14.                 |
| 3.                  | 6.                  | 9.                  | 12.                 | 15.                 |

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: <u>www.lmhhhoa.com</u>. **Submit the application by email to <u>annie.white@fsresidential.com</u> or <u>mary.ward@fsresidential.com</u> or deliver in person to the Lifestyle Team.** 

Submitted By (Name & Signature of Interim Officer): \_\_\_\_\_\_

Signature:	Date:			
For Association Use Only				
Approved Conditions: Manager Signature:	Date:			
Denied: Management Signature:	Date:			
Notes:				