



Latitude at Daytona Beach Homeowners Association, Inc.
Resident Charter Club Application

Resident Name: _____ **Phone:** _____

Address: _____ **Email:** _____

Which of the following apply: Initial Charter Club _____ Update 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 Daytona Beach Homeowners Association. Please allow up to 14 days for 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	Name of Club Member	Name of Club Member	Name of Club Member	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 Daytona Beach Homeowners Association, including but not limited to the Charter Club and Interest Group Rules and Regulations, which can be found on the Association website: www.lmdbhoa.com. **Submit the application by email to chelsea.larue@fsresidential.com, 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: _____