

PRIVATE CLUB APPLICATION

Name of Establishment _____

Address of Establishment _____

Contact Name _____

Contact Number _____

Please answer the questions listed below, you may be required to provide documentation to support your answers:

1. Does the establishment occupy a portion of a building used exclusively for club purposes at all times?

YES NO

2. What is the establishment's purpose? Circle all that apply

recreational fraternal social patriotic political benevolent athletic

3. Is the establishment's purpose for pecuniary gain?

YES NO

4. Does the establishment have an annual meeting of its members?

YES NO

5. Is the establishment managed by a board of directors, executive committee or similar body chosen by its members at an annual meeting?

YES NO

6. Does the establishment have bylaws or a constitution that governs its activities?

YES NO

7. Has the establishment been granted an exemption from paying federal income taxes under 26 U.S.C.A. Section 501? If answered "yes" you must attach proof of the tax exemption.

YES NO

I certify that I have answered the above questions truthfully and can provide documentation to verify my answers.

Signature