



# NEW CLUB OFFICERS AND RULES, REGULATIONS AND PROCEDURES FOR CHARTERED CLUB AFFIRMATION REPORT

Form CR-5

DUE DATE: Annually or 14 business days of taking Office  
RETURN TO: Recreation Activities Manager

<b>CLUB NAME:</b>		
<b>LOCATION:</b>		<b>DATE:</b>
<b>President (PRINT)</b>		<b>Rec. Card No.</b>
<b>Address</b>		
<b>Telephone</b>		<b>E-Mail</b>
<b>*SIGNATURE</b>		
<b>Vice-President (PRINT)</b>		<b>Rec. Card No.</b>
<b>Address</b>		
<b>Telephone</b>		<b>E-Mail</b>
<b>*SIGNATURE</b>		
<b>Secretary (PRINT)</b>		<b>Rec. Card No.</b>
<b>Address</b>		
<b>Telephone</b>		<b>E-Mail</b>
<b>*SIGNATURE</b>		
<b>Treasurer (PRINT)</b>		<b>Rec. Card No.</b>
<b>Address</b>		
<b>Telephone</b>		<b>E-Mail</b>
<b>* SIGNATURE</b>		
<b>Content Manager</b>		<b>Rec. Card No.</b>
<b>E-MAIL</b>		
Term of Office for above Officers is <b>FROM</b> _____ <b>TO</b> _____		
*We the above signed officer(s) have read and understand the Rules, Regulations, and Procedures for Chartered Clubs in the Recreation Centers of Sun City West, Inc. and will abide by them.		
<b>Clubs Official Mailing Address</b>		
<b>Street</b>		
<b>City, State, Zipcode</b>		
<b>SUBMITTED BY:</b> _____ <b>TITLE:</b> _____ <b>DATE:</b> _____		