

**APPLICATION FOR RECOGNITION AS A LAKE ROYALE
ORGANIZATION/ACTIVITY**

Organization/Activity: _____

Director/Leader: _____ Phone #: _____

Address: _____ City/State: _____ Zip: _____

Purpose: _____

Describe your organization: (Is this a business? A service organization?)

What are the regular activities/meetings: _____

Who is eligible to participate? _____

Is there a charge for participating? _____

If so, is this "for profit"? _____ Who benefits from the profit? _____

Person submitting form: _____ Phone #: _____

Address: _____ City/State: _____ Zip: _____

 X
Signature _____ Date _____