LAWRENCE PARK GOLF CLUB

Affidavit of Domestic Partnership

DECLARAT	ON
We,_	and, declare that
we are, and to Section IV	have been, in a domestic partnership, and in accordance with the Amendment of Article 4 of the LPGC By-Laws, we certify the following eligibility criteria for nt of a Domestic Partnership as of
1.	We have lived together for at least six (6) months at:
2.	We are both twenty-one (21) years of age; or older.
3.	We have lived in a committed relationship since(Approximate Date)
4.	We are not married to anyone else nor have another Domestic Partner.
Family Memb	We designate as the Primary Member of our pership for all voting eligibility on all matters coming before the Members, and ent of all financial obligations of the Family Membership.
CHANGE IN I	DOMESTIC PARTNERSHIP
Partnership s	gree to notify LPGC within thirty (30) days of any change in our Domestic status which would make either of us no longer eligible for the benefits of a bership as defined in Section IV of Article 4 of the LPGC By-Laws. The

Statement of Termination shall affirm that the Domestic Partnership status is terminated as of the date of the execution specified therein, and that a copy has been mailed to the other party by the party authorizing the action.

VERIFICATION

We, the undersigned hereby verify that the statements made in the Af	fidavit of
Domestic Partnership are true and correct based upon our personal kr	nowledge.
information and belief. This Verification is made subject to the penalties of 18	PA C.S.A.
Section 4904 relating to intentional falsifications.	