

ALAMO AREA SKP CO-OP/ RETREAT, INC.

131 Private Road 5240 Hondo Texas 78861-5427 Phone 830-363-7623 FAX 830-363-5110

E-Mail: info@lonestarcorral.com

ACTIVE WAITING LIST APPLICATION

I/We wish to be on the Active Waiting List for the purchase of a Membership at the Alamo Area SKP Co-Op/Retreat, Inc., (Lone Star Corral) 131 Private Road 5240, Hondo, Texas 78861-5427.

I/We understand that Type of RV:	nat Members are one or tv	vo adults traveling together	in one RV.	
○ Motorhome	: Fifth-wheel	Travel trailer	Other	
- -	Please mark your age: At least one person Both people are yo	community consisting of 80 on this application is 55 ounger than 55 (restriction cense for each person is	rolder	
I/We agree to pay	with TWO SEPARATE CH	IECKS each payable to:	'Alamo Area SKP Co-Op."	
	or a lot deposit r administrative fees			
I/We understand th refundable.	at the \$500.00 deposit ca	ın be refunded at either pa	rty's discretion and the \$30.00 is n	on-
NAME:	(5)	NAME:		
			(Print)	
ADDRESS:	(Please ente	r only ONE addraga)		
CITY/STATE/ZIP				
PHONE:		CELL PHONE:		
		KPIRATION DATE:		
E-MAIL ADDRES	SS:			
I/We pre	fer e-mail	I/We prefer regula	r mail (requires you to call in a use fax method)	and
(Signature)		(Signature)		
DATE:				



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For Those Applying for ACTIVE WAITING LIST

The Alamo Area SKP Co-Op (LSC) is a retirement community as defined in the HOPA Act of 1995. HOPA defined the statutory definition of housing for older persons as housing intended and operated for occupancy by at least one person 55 years of age or older per unit. The Act establishes a good faith reliance defense or exemption against monetary damages for persons who legally act in good faith to exclude children based on a legitimate belief that the housing facility or community was entitled to the exemption. The Act requires that facilities or communities claiming the exemption establish an age verification procedures.

In order for the LSC to claim the exemption, the LSC must verify that at least 80% of the membership lots are occupied by at least one person that is 55 years of age or older. To make the awarding of memberships to those on the AWL go smoothly, you are requested to verify that one of you is 55 years of age or over. A birth date is not required.

If you have dependent children that will be living/traveling with you, your status on the AWL will be affected. If you have two named people on your AWL application, one of the named people should be over the age of 55. If neither is over the age of 55, your status on the AWL may be affected. The same 55 years of age or older requirement applies to a single, meaning one, person making application.

Please sign and return with your application.						
Signature	Signature					
Date						



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ACKNOWLEDGEMENT FORM

I/we have received and read the Co-Op's By-Laws, Standing Rules, Park Rules and agree to abide by them.

The Alamo Area SKP Co-Op is a retirement community consisting of 80% over 55+.

P	ase mark your ag At least one pe Both people ar	e rson on this applicati e younger than 55	on is 55 or older
S	igned		 Date
			Date
Print	Name		
Sign	ned		Date
Print	Name		
SKP #		Expiration Date:	
Type of RV: → Motorhome	○ Fifth-wheel	○ Travel trailer	○ Other

PLEASE RETURN WITHIN THIRTY DAYS