

**Mail To:**

Minnesota Attorney General’s Office  
ATTN: Club Contracts Registration  
445 Minnesota Street, Suite 600  
St. Paul, MN 55101

**STATE OF MINNESOTA**  
  
**CLUB APPLICATION FOR  
EXEMPTION FROM  
REGISTRATION**

(Pursuant to Minn. Stat. §§ 325G.23-.28)



**SECTION A: Information for Organization Seeking Exemption**

Legal Name of Organization: \_\_\_\_\_

Mailing Address:	Physical Address:
_____	_____
Contact Person	Contact Person
_____	_____
Street Address	Street Address
_____	_____
City, State, and Zip Code	City, State, and Zip Code
_____	_____
Phone Number	Phone Number
_____	_____
Email Address	Email Address

1. Primary purpose of the organization: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Identify the date and the jurisdiction of organization/incorporation: \_\_\_\_\_

\_\_\_\_\_



## CLUB APPLICATION FOR EXEMPTION FROM REGISTRATION (Continued)

3. Identify each facility the organization operates in Minnesota that you are seeking to exempt through this application (attach a list if more space is needed):

Facility #1	Facility #2
_____ Manager/Contact Person	_____ Manager/Contact Person
_____ Street Address	_____ Street Address
_____ City, State, and Zip Code	_____ City, State, and Zip Code
_____ Phone Number	_____ Phone Number
Facility #3	Facility #4
_____ Manager/Contact Person	_____ Manager/Contact Person
_____ Street Address	_____ Street Address
_____ City, State, and Zip Code	_____ City, State, and Zip Code
_____ Phone Number	_____ Phone Number

4. Identify the reason(s) you claim the organization is exempt from registration by checking all appropriate boxes below:

- ☐ The organization is a nonprofit organization.  
☐ The organization is a private club owned and operated by its members.  
☐ The organization is operated by the state or one of its political subdivisions.  
☐ The organization does not offer facilities for instruction or training in physical fitness.  
☐ The organization does not match men and women for dating or general social contact.  
☐ The organization does not provide benefits to members through cooperative purchases.  
☐ Other (explain) \_\_\_\_\_



## CLUB APPLICATION FOR EXEMPTION FROM REGISTRATION (Continued)

5. If there is any other information you would like this Office to consider in evaluating your application for exemption, please provide it here (or attach any materials you would like considered):

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### **SECTION B: Certification**

I hereby certify, under penalty of perjury, that the information contained in this Club Application for Exemption From Registration form is complete, true, and correct. I further hereby certify that I am authorized to submit this Club Application for Exemption From Registration form on behalf of the organization identified in Section A of this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name and Title (please print)

\_\_\_\_\_  
Date

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public