

Metropolitan Chicago Association of Square Dancers

MCASD Membership Club Info Form

August 1, 2025 – July 31, 2026

Club Name: _____ Incorporated: ☐ Yes ☐ No

Dance Level: ☐ SSD ☐ Mainstream ☐ Plus ☐ Advanced ☐ Challenge

Regular Dance Schedule: (check the appropriate answers) ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th
☐ Mon ☐ Tue ☐ Wed ☐ Thu ☐ Fri ☐ Sat ☐ Sun

Dance Start Time: _____ PM **Dance Type:** ☐ Squares ☐ Rounds ☐ Lines ☐ Alternating

Dance Location: _____

Address, City, Zip _____

Emergency Phone #: _____ **Website:** _____

Club Membership: **Number of Members:** _____ **How many are under 18?** _____ / None

Club President:

Name: _____

Address: _____

Phone: _____ **Email:** _____ @

Delegate:

Name: _____

Address: _____

Phone: _____ **Email:** _____ @

Delegate:

Name: _____

Address: _____

Phone: _____ **Email:** _____ @

Registered Agent: (required by the IRS) An explanation can be found in MCASD Handbook

Name: _____

Address: _____

Phone: _____ **Email:** _____ @

Lessons: ☐ Yes ☐ No (If yes, complete below)

Day: _____ **Start Date:** _____ **Time:** _____ PM **# Lessons:** _____

Location: _____ **Instructor:** _____

Address: _____

Contact: _____ **Phone Number:** _____ **Email:** _____ @