

Metropolitan Chicago Association of Square Dancers Membership Form

August 1, 2023 - July 31, 2024

Club Name: _____ Incorporated: ____ Yes ____ No

Dance Level: ____ Mainstream ____ Plus ____ Advanced ____ Challenge

Regular Dance Schedule: circle or underline the appropriate answers: __ 1st __ 2nd __ 3rd __ 4th __ 5th
__ Mon __ Tues __ Weds __ Thurs __ Fri __ Sat __ Sun

Rounds @ _____ PM Squares @ _____ PM Line Dancing @ _____ PM

Dance Location _____

Address, City, Zip _____

Emergency Phone Number _____ Website: _____

of Couples _____ # of Singles _____ # of Youth _____ Club Membership Total _____

Club President:

Name: _____

Address: _____

Phone Number: _____ Email: _____

Delegate:

Name: _____

Address: _____

Phone Number: _____ Email: _____

Delegate:

Name: _____

Address: _____

Phone Number: _____ Email: _____

Registered Agent: (required by the IRS) An explanation of the registered agent can be found in the MCASD handbook.

Name: _____

Address: _____

Phone Number: _____ Email: _____

Lessons:

Day: _____ Date Starting: _____ Time: _____ # of Lessons _____

Location: _____ Instructor: _____

Address: _____

Contact: _____ Phone Number: _____ Email: _____