



Membership Application

Date: _____

Application is hereby made for membership in the River City Dancers Square and Round Dance Club (Please print your names as you want them to appear on our club roster and on your club name badges). This application is for couples or singles. Only complete fields that apply.

Name(s):

Address: _____
First Last First Last
Street City State Zip Code

Phone:

Home: _____ Mobile: _____

Email 1:

Email 2:

Celebrations: (Month/Day/Year)

Anniversary: _____ His Birthday: _____ Her Birthday: _____

Occupations:

His: _____ Hers: _____

How long have you been square dancing? _____ (years). Please list square dance clubs you are now or have been members of: _____ Will your club insurance be continued through another square dance club? Yes No (This is to prevent duplicate coverage)

On becoming members of the River City Dancers, we agree to serve on the Kitchen and Door Committee at least three times per year (see Vice President Couple to sign up for this committee). We will fulfill other membership responsibilities.

Approval Date: _____ First Quarter Dues paid: _____ Badges paid: _____

New Dancer Lessons Statement - to be completed by class committee if applicants are class members: The applicants have completed Basic Square Dance Lessons and are capable of dancing at our club level.

Class Chairperson: _____ Instructor: _____

New Applicants – not taking RCD lessons

Three sponsors

Names	Signatures
_____	_____
_____	_____
_____	_____