

INSURANCE NOTICE

ANY ADDITION TO THE CLUB ROSTER AFTER THE INITIAL ENROLLMENT FOR THE YEAR WILL REQUIRE AN ENROLLMENT FEE PER DANCER.

ADDITIONAL CLUB ENROLLMENT

COUNCIL/ASSOCIATION/FEDERATION: California Square Dance Council

ASSOCIATION/FEDERATION:

CLUB NAME:

PERIOD (Month / Year): _____

Name of Dancer	<i>Alpha by Last Name, First Name</i>	Name of Dancer
1.		15.
2.		16.
3.		17.
4.		18.
5.		19.
6.		20.
7.		21.
8.		22.
9.		23.
10.		24.
11.		25.
12.		26.
13.		27.

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