

DANCING WITH MERI SQUARES
SSD REGISTRATION FORM



NAME: (please print) _____

How would you like your name to appear on your name badge:

same as above ____ or _____

ADDRESS: Street _____

City _____ Prov. _____ Postal Code _____

Telephone Number: _____

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Telephone Number: _____

Do you wish your phone number included in the Club Member list,
which is shared with all Meri Squares dancers? Yes ____ No ____

Do you wish your e-mail included in the Club Member list? Yes ____ No ____

Fees:

\$130.00 membership

Cheque payable to Meri Squares _____

Cash _____

Etransfer to treasurer@merisquares.ca _____

(account is setup for autodeposit)

Signed: _____ Date: _____

Received by: _____ Date: _____

How did you hear about Social Square Dancing?

Door hanger _____

Poster _____

Meri Squares website _____

Friends/family _____

Other (please specify) _____