DANCING WITH MERI SQUARES SSD REGISTRATION FORM



NAME: (please print)			_
How would you like you	r name to appea	r on your name badge?	
same as above or			
ADDRESS: Street			
City	Prov	Postal Code	
Telephone Number:			
Email Address:			
Emergency Contact Nan	ne:		
Emergency Contact Tele	phone Number:		
Do you wish your phone nu	mber included in th	e Club Member list,	
which is shared with all Me	ri Squares dancers ?	Yes No	
Do you wish your e-mail inc	luded in the Club M	1ember list? Yes No	
Fees:			
\$135.00 membership (r	no refunds)		
Cheque payable to Meri	Squares		
Cash			
Etransfer to treasurer@	merisquares.ca		
(account is setup for autode	eposit)		
Signed:		Date:	
Received by:		Date:	
How did you hear about	: Social Square D	ancing?	
Door hanger		Business Card	
Meri Squares website		Friends/family	
Other (please specify)			