

CHARLOTTESVILLE SWING DANCE SOCIETY

Membership Form

(Memberships are \$15/year & are sold for one-year periods.)



(Please Print Clearly!!)

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone (optional): (H) _____ (W) _____ (M) _____

E-Mail* (optional): _____ Birthday: _____ (m/d)

***Note:** Providing your email address will allow CSDS to email you announcements related to the Club. Your personal information is confidential and will not be distributed/sold.

Membership Benefits:

- * FUN!!
- * Support of swing dance activities and CSDS events (Dances, Swing Swap, Web Site, Hotline, Workshops, etc.)
- * Discounts on most dance admissions and workshops
- * Excellent social atmosphere
- * Monthly newsletter
- * Make new friends

Payment Methods:

- 1) Fill out this form and send with check payable (\$15/person) to "CSDS" to:

CSDS
c/o Adela C. Su
903 Second Street NE
Charlottesville, VA 22902-4348

- 2) Make payment (\$15/person) via PayPal (www.paypal.com). Send payment to "cvilleswingdance@gmail.com".

LIABILITY WAIVER: I do hereby for myself and my heirs, executors and administrators waive and release any and all rights and claims of damage I may accrue against the Charlottesville Swing Dance Society and all persons affiliated with this event for any and all injuries I may suffer while traveling to/from or while participating in CSDS functions.

Signature Date

Amt	_____
Date	_____
Exp	_____