

2018

CLUB AFFILIATION INFORMATION FORM



THE SQUARE DANCING SOCIETY OF QUEENSLAND INC.

ABN 47 164 072 405

CLUB FULL NAME	
ASSOCIATED CLUB NAME	
CLUB DELEGATES (maximum 2 per Club)	
CLUB POSTAL AND EMAIL ADDRESS	
PROXIES	
CALLER/CUER/TRAINEE (Name/contact details)	
DANCE VENUE ADDRESS DETAILS	
PERMISSION TO USE DETAILS OF CLUB/CALLER/CUER ON WEBSITE	
FURTHER INFORMATION (Dance times)	
RENEWAL OF CLUB AFFILIATION	
	(Please Sign and Date here)

Please complete all sections of this Form.

In the Section Callers/Cuers/Trainee, please include names, addresses and contact details.

Should more space be required please add to reverse of this Form. This information is required to maintain accuracy in the The Square Dancing Society of Qld Inc. database .

Once you have completed all sections of this Form you are then required to

- i Form to be sent to the Society Membership Liaison Officer including payment of \$25.00 per each Affiliated Club.
- ii. send via email directly to squaredanceqld.registrar@gmail.com; or via Australia Post direct to the Membership Liaison Officer, 1/34 Mitre Street, St Lucia QLD. 4067.

Membership shall be available to all Queensland Square Dance Clubs who subscribe to the Objects of the Association, provided they abide by the "Standards of Conduct" and the "Code of Ethics" as described on the Society Website. Upon approval and ratification of the Club Affiliation Form by the Management Committee, confirmation to the relevant Club will be communicated.