Last Name

HOTLANTA SQUARES MEMBERSHIP APPLICATION

Date: _____

Mark One: New Member ☐ Change of Information Only ☐

		Publish in Roster Yes	No
Name (last, first):	_____		
Street Address:	_____	✔	☐
City, State, Zip Code	_____	✔	☐
Home Email:	_____	✔	☐
Work Email:	_____	✔	☐
Cell Telephone:	(____)_____	✔	☐
Home Telephone:	(____)_____	✔	☐
Work Telephone:	(____)_____	✔	☐

Birthday (month/day only) ____/____

Anniversary (month/day only) ____/____ Partner's Name _____

Please check all that apply:

__ I wish to receive local, state and national square dance information via email.

__ I wish to help on the following committees (please check one or more)

__ Weekly Hospitality __ Fly-in __ Dances __ Publicity __ Archives __ (other) _____

➢ If you wish to purchase a badge ($6), list name as you want it to appear:

First Name	Last Name (optional)

All information will be kept confidential, for HOTLANTA SQUARES' use ONLY, and will not be distributed to any other organization or mailing list.

For Club Use:

Dues Paid		Date: _____	Check / Cash
Badge Ordered	Yes / No	Date: _____	Check / Cash
Badge to Member	Yes / No	Date: _____	
Added to Roster	Yes / No	Date: _____	
Added to Email List	Yes / No	Date: _____	