

- Membership Application
- Membership Renewal
- Student Annual Waiver



Name: \_\_\_\_\_ (Required)  
 Email: \_\_\_\_\_ (Required)  
 Phone number: \_\_\_\_\_ (Required)

- I may be available to volunteer at Weekly Dances.
  - Set Up/Tear Down
  - DJing
  - Dancer Check In
  - Take Photos
- I may be available to volunteer at Monthly Dances.
  - Set Up
  - Tear Down
  - Dancer Check In
  - Host out of town dancers
  - Bring Food
  - Take Photos
- I may be available to help with dancer check-in at lesson series
  - Beginner
  - Continuing
- I may be available to help with internal projects or participate on a sub-committee.
- Other: \_\_\_\_\_
- Please exclude my name and e-mail address from the club directory.

**Required Waiver:**

I hereby certify that I have been notified that the Madison West Coast Swing Club, its board members and instructors accept no responsibility for injury occurring out of or from my participation in or travel to any club meeting, class, dance, or function. The Madison West Coast Swing Club has advised me to carry my own Medical and accident insurance.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If returned by mail, send to: **MWCSC**  
**P.O. Box 628301**  
**Middleton, WI 53562**

For club use only:

Amount paid: \_\_\_\_\_ Balance due: \_\_\_\_\_