

The South Australian Square Dance Society Inc.

YEARLY MEMBERSHIP APPLICATION

1st July 2023 to 30 June 2024

Membership per p	person \$20.00	Family Name:
lard copy	\$15.00	
Postage	\$15.00	Given Names:
	TOTAL \$	
Address:		
Phone:		Post Code:
/We agree to rec inless indicated o		unication from SASDS Inc via this email address
Email:		@
We understand that	p Only (Please tick if ap Approved Square Dance attir is activity is at my own risk.	plicable) e is required at Society functions, when visiting other clubs and
igned:		Date:
3		
Please give this form	to your club representative c	or post to: The Membership Secretary, 10 Angel Pl Paralowie,
Adelaide S.A 5108		
My payment is en Name: SASDS Ind		BSB: 085-005 Account No: 91-374-6595 Account
Direct Transfer N	No:	
Membership No:		Receipt No: