



Club Application or Renewal Package

Federation Renewal for **2024** has been modified. This membership package includes information needed to process your membership and list your club in the Directory. Clubs that request liability insurance will pay \$50. Please complete these forms and send them with a check to Mindy Belli.

The deadline for submitting your paperwork and payment is December 1, 2023. Please let the Federation know if your club will not be dancing in 2024 by sending a note to:

president@socalfolkdance.org.

IMPORTANT: These forms work best if opened in **Adobe Reader** (or Acrobat if you have it). Even if you can open PDFs on your computer, **you should use Adobe reader**. Adobe Reader is FREE.

Before you go any farther

1. Click [this link](https://get.adobe.com/reader) to install Adobe reader (<https://get.adobe.com/reader>).
2. Close this document and re-open the document. It should open in Adobe Reader.

You may submit all of the “paperwork” via email. All of the forms can be completed on your computer. Alternately you can print out forms and mail them in if you wish.

The required forms are:

Form AR: Club Application or Renewal

Form B: Club Info

Form R: Member Roster

If you have questions about insurance, please contact:

Contact Julith Neff, Insurance Chair
julithilona@gmail.com
(562) 881-9504

Contact Diane Baker for questions about membership
president@socalfolkdance.org
(949) 675-2199

On the website (www.socalfolkdance.org) find forms to submit if your club is holding a special event at a location other than your regular meeting site.

We are thrilled that your club continues to meet for dancing and that you are members of the Folk Dance Federation!

Diane Baker

Federation President



Club Application or Renewal

Club name: _____

Membership Dues & Acknowledgement

Membership type: Recreational club Exhibition group

Insurance \$ 50.00

Annual membership dues (\$15.00) \$ _____

Plus \$1.00 per member (_____ x \$ 1.00) \$ _____

Additional meetings per week (_____ x \$ 7.50) \$ _____

Here is our tax-deductible donation to the Federation \$ _____

Total enclosed: \$ _____

I acknowledge that

1. We meet and accept the conditions for membership as set forth in the attached Club Criteria;
2. A club delegate will attend Federation Council meetings if we wish to maintain participating status;
3. The membership year is 1 January through 31 December;

Club officer (name & title)

Date

Deadline is December 1, 2023

You are encouraged to submit all of the "paperwork" via email. Forms can be completed on your computer. You can also print out forms and mail them in if you wish.

Please send **check payable to Folk Dance Federation**, and completed forms (if not e-mailed) to:

Mindy Belli, Treasurer
321 S. Vista del Canon
Anaheim, CA 92807
Mindybg2019@gmail.com

For insurance questions, please contact:

Julith Neff, Insurance Chair
julithilona@gmail.com
(562) 881-9504

For membership questions contact
Diane Baker president@socalfolkdance.org
(949) 675-2199

Club Information

Club name: _____

Website (if any): _____

Club Contact and Delegate Info

Club Contact:

This person receives Federation renewal packages, ballots, minutes, etc.

Name: _____
Email: _____
Phone: _____
Address: _____
City, State, Zip _____

Club Delegate:

(Yes, you can leave the **contact** info blank if it's the same as above)

Name: _____
Email: _____
Phone: _____
Address: _____
City, State, Zip _____

Alternate Delegate (if any):

Name: _____
Email: _____
Phone: _____

Send our insurance certificate to:

Name: _____
Email: _____

Club Meeting Info

If nothing has changed since last year, please just write "No changes".

Day: _____ Time: _____ Cost: \$ _____

Level: Beginning Intermediate Advanced
 Children ok Senior only Live music Singing

Type: Open Closed Exhibition

Type of dancing: _____

Location: _____ Phone: _____

Address: _____
City, State, Zip _____

Contact person for *this event** _____ Phone/email: _____

Teacher or leader: _____ Phone/email: _____

Other info (if any): _____

* This is information about this event. Only enter a contact person if different from the club contact (above).

Club Information (continued)

Club name: _____

If nothing has changed since last year, please just write "No changes".

Additional Meeting (for multi-night clubs)

Day: _____ Time: _____ Cost: \$ _____

Level: Beginning Intermediate Advanced
 Children ok Senior only Live music Singing

Type: Open Closed Exhibition

Type of dancing: _____

Location: _____ Phone: _____

Address: _____

City, State, Zip _____

Contact person *for this event** _____ Phone/email: _____

Teacher or leader: _____ Phone/email: _____

Other info (if any): _____

* This is information about this event. Only enter a contact person if different from the club contact.

Additional Meeting (for multi-night clubs)

Day: _____ Time: _____ Cost: \$ _____

Level: Beginning Intermediate Advanced
 Children ok Senior only Live music Singing

Type: Open Closed Exhibition

Membership Roster

Club name: _____

You can use this form if you wish or attach your own roster. Please write legibly. Optimally, do it on the computer and email it or send a print-out.

Club members:

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____
- 8 _____
- 9 _____
- 10 _____
- 11 _____
- 12 _____
- 13 _____
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