



Goldsboro, NC

Sugarfoot Shag Club **Membership Application Guidelines**

Revised 09/12/2016

Thank you for your interest in becoming a part of the Sugarfoot Shag Club! If you would like to help on any of our committees, let us know as we could certainly use your help. If you have any questions, please ask any Board Member.

New Members:

- Fill out the attached Membership Application Form and sign it.
- You must have a Sugarfoot member, in good standing, sign your application as sponsor.
- Our membership year is from July 1 thru June 30.
- We have one Membership Drive each year.

June : We encourage all current members to re-up during this month. The membership fee is \$25. **Members will get in for the party that night!**

- In an effort to encourage all guests to join the club and pay the member price for entry to our parties **you will get in free to the party the night you join with your paid membership fee of \$25, this excludes special event parties. (i.e. Fundraiser Mike Overman Charity, Shag-O-Ween, Christmas Party etc.)**
- All new members are voted on at the next Board of Directors Meeting for membership into the Sugarfoot Shag Club.

Renewing Members & Charter Members:

- Fill out an application if any of your information has changed so we can correct our records, Sign and return.
- In accordance with the By-Laws of the Club, you must renew by **August 31st** of each year to maintain your membership or Charter Member status.
- Our membership year is from July 1 thru June 30.
- Please renew your membership at our June Membership Drive Party pay the \$25 Non-Charter or \$15 for Charter dues and you will **Get in Free for the party that night!**

Sugarfoot Shag Club



Goldsboro, NC

Sugarfoot Shag Club
Membership Application

This Association is established to promote and preserve the Shag Dance and Shagging Music by Providing classes, activities, and places to party together or with another Shag Club. The purpose of the **Sugarfoot Shag Club** is to communicate the importance and preserve the heritage of the music and dance.

Name: _____ Address _____

City: _____ State _____ Zip Code _____

Home Tel#: _____ Cell#: _____ Work#: _____

Age: _____ Date of Birth: ____/____/____ Single: _____ Married: _____
Mo day yr (optional)

E-Mail Address: _____

To receive Newsletter and Party Communication

Would you be interested in contributing and supporting the **Sugarfoot Shag Club** in the following capacities?

Chairing a Committee? Yes: _____ No: _____

If "yes", what type? _____

Working on a Committee? Yes: _____ No: _____

If "yes", what type? _____

- I, hereby, make application for membership to the **Sugarfoot Shag Club** and I agree to abide by the **Sugarfoot Shag Club** Charter, and the rules and membership requirements governing the Association of Carolina Shag Clubs.
- I, hereby, agree that **Sugarfoot Shag Club** will not be held responsible for any injury/death incurred while attending a **Sugarfoot Shag Club** function/event.
- Photos taken at functions/events, phone numbers, and e-mail addresses of said member will be used for **Sugarfoot Shag Club** business only.

Signature of Applicant

Date

Signature of Sponsor

*All Membership Applications must be approved by the **Sugarfoot Shag Club** Board of Directors. Must be 21 years of age for membership.*

Membership Dues:
\$25.00 Non-Charter Member

Please make your check payable to:
Sugarfoot Shag Club
P.O. Box 223
Goldsboro, NC 27533

For Shag Club Use:

Membership approval Date: _____

Treasury Receipt Initial & Date: _____