



Illinois Federation of Square & Round
Dance Clubs



Please complete the following form for a full listing of all of your dancers by First Name and Last Name.

These names will be used only to verify the number of dancers and correct numbers for the S.C.I.S.D.A. insurance by clearing up any duplicate memberships so that the insurance count does not include a dancer more than once.

CLUB NAME: _____

NO.	NAME/NAMES	LAST NAME
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