

**2025 SCW LINE DANCERS
MEMBERSHIP REGISTRATION**

Status: \$5.00 New _____ \$5.00 Renewal _____

Print Name: _____
(As shown on SCW Recreation Card)

Phone: _____

SCW Recreation Card # _____

Address: _____
(SCW, AZ 85375)

E-mail: _____
(Optional for club emails)

Your signature below also acknowledges that you will not photograph or video classes. The club or RCSCW may take pictures for the express purpose of advertising and promoting our class.

Signature _____

Date _____

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