

Vancouver Island Scottish Country Dance Society
New Member to VISCDs Application 2019/20

Membership is due by October 1, 2019. Please submit your completed Membership Application, including payment (see details below), by mail or to your class rep as soon as possible. Please keep this page for future reference.

Note that participation in the VISCDs is at the risk of each individual.
The VISCDs assumes no risk or responsibility for personal injury or loss.

Membership Fee:

Adults: \$30.00

Youth members (16 to 25): \$20

Class Fees: You may attend any number of classes when you pay class fees.
The three classes in September are FREE.

One year, Sept-Apr (28 classes): \$108.00

Sept.-Dec. (14 classes): \$60.00

Jan.- Apr. (14 classes): \$60.00

Youth: Free

Class Drop-In is only available to registered members with the purchase of a punch card, \$60.00 card for 10 classes. Purchase your card through your class rep.

New members will receive a complimentary name badge.

Payment Options:

Cheque made payable to VISCDs - mail or deliver to your class rep

Cash - deliver to your class rep or Rick Deegan (DO NOT mail cash)

eTransfer to viscds.fees@gmail.com - remember to submit completed form

Mailing Address:

VISCDs Membership Director

Attn: Rick Deegan

1739 Christmas Avenue

Victoria B.C. V8P 2X9

VISCDs New Membership Application 2019/20

Contact Information

Name(s): _____

Address: _____

Address: _____ Postal code: _____

Tel. (____) _____ Email: _____

Emergency contact: Name: _____ Phone:(____) _____

Fees: All fees shown below are at the per person rate:

Annual membership (adult) \$ 30.00 x _____ = \$ _____

(youth) \$ 20.00 x _____ = \$ _____

Classes full year (Sept-Apr) \$108.00 _____ = \$ _____

half year (Sep/Dec) \$60.00 _____ = \$ _____

(Jan/Apr) \$60.00 _____ = \$ _____

Drop-In punch card (10 classes) \$ 60.00 x _____ = \$ _____

TOTAL PAYMENT..... \$ _____

In which class will you register? _____

Please indicate how you would like to receive our newsletter, "Island Fling":

Electronic: _____ Paper copy: _____

Are you OK being photographed as part of a dancing group for the purposes of VISCDs publicity? Yes: _____ No: _____

By signing below I agree that VISCDs is not responsible for any accident or injury incurred during classes.

Name _____ Date _____

Name _____ Date _____