

**Vancouver Island Scottish Country Dance Society**  
**Returning Member Application 2020/21**

Membership is due by October 1, 2020. Please submit your completed Membership Application, including payment (see details below), by mail or to an Executive member 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): \$20.00

**Class Fees:** Class schedules and formats have not yet been determined, but could be a combination of Zoom presentations and small, in-class participation. Class fees, once determined, will be broadcast to the membership.

Youth: Free Classes

Returning members may order a replacement magnet-backed name badge for \$7.00. Place your order on your registration form or request through Barb Currie.

**Payment Options:**

Cheque made payable to VISCDs - mail or deliver to an Executive member

Cash - contact and hand deliver to an Executive member (DO NOT mail cash)

eTransfer to [viscds.fees@gmail.com](mailto:viscds.fees@gmail.com) - no security question required (remember to submit completed form)

**Mailing Address:**

VISCDs Membership Director

Attn: Barb Currie

1023 Davie Street

Victoria B.C. V8S 4E2

VISCDS Membership Application 2020/21

Contact Information

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ 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 \_\_\_\_\_ = \$ \_\_\_\_\_

Class schedules and fees to be determined at a later date.

Replacement name tag \$ 7.00 x \_\_\_\_\_ = \$ \_\_\_\_\_

TOTAL PAYMENT..... \$ \_\_\_\_\_

Are you OK being photographed (including video) 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 or socials.

Name \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_