

SCA Ballroom Dance Club (SCABDC)

Membership Form (\$10/person)

Date: _____

RENEWAL for calendar year 2024

NEW MEMBER for calendar year 2024

1) Name(Print) _____ SCA#: _____

Email (Print): _____ CELL: _____

Address: _____ ZIP: _____

2) Name(Print) _____ SCA#: _____

Email (Print): _____ CELL: _____

Address: _____ ZIP: _____

- Check(s) payable to: **Sun City Anthem Community Association, Inc.** (Do NOT abbreviate)
- Drop it off in the **Ballroom Dance Club mailbox** located in the Anthem Fitness Center

