California Council of Square Dancers, Inc Insurance Program



NORTHERN CALIFORNIA SQUARE DANCERS ASSOCIATION



Delegate NCSDA Membership Committee

PO Box 23972, Pleasant Hill, CA 94523

Membership Chairman

Club Insurance Representative Contact Information

We are asking that there be only one person who is in charge of requesting insurance certificates. All certificates and/or correspondence will be sent to the representative and address listed below. Any questions we have will be directed to this representative.

PLEASE NO EXCEPTIONS.

If the club insurance or membership contacts change, please submit a new form to the Association Membership Chairman immediately. This form is also available on the Association's website – NCSDA.com. This form may be emailed

DATE: / /
CLUB:

CLUB'S INSURANCE REPRESENTATIVE

NAME:

ADDRESS:

PHONE: () CELL: () FAX: ()

EMAIL:

This information is for Intra-Association purposes only! Not for publication or distribution