UNITED SQUARE DANCERS OF AMERICA SQUARE DANCE INSURANCE

State/Regional Affiliation _____

Year _____ Check Number
Check Date ______

Number of Clubs
Total Number of Members

Amount Due
Amount Due

Number of Minimum Clubs
Total Number of Members

Amount Due
Amount Due

Image: State of Members
Image: State of Members

Image: State of Members
Image

Please Make Check Payable to United Square Dancers of America and Enclose:

- (A) Check for Total Amount Due
- (B) This Form Listing All Clubs Being Paid For
- MAIL TO: United Square Dancers of America National Insurance Coordinator P O Box 417 Stephens, GA 30667 TEL: (706) 759-3642

USDA Club #	Club Name	No. of Dancers	No. of ITAC	No. Paying this Club	Amount

ITAC = Insured Through Another Club

11/20/2024