SADDLEBROOKE LINE DANCE CLUB NEW MEMBER FORM

Name:	
Please check one	Full-Time Resident: Part-Time Resident:
HOA#1	HOA#2
Address:	
Email Address:	
Phone Number:	
How did you hear	about our club?
	LIABILITY RELEASE
and that persona represent that I SaddleBrooke Lin In conside I hereby waive, re all present and f	and and acknowledge that there is a risk of injury inherent in dance activities of injury could result during participation in dance and related activities. It am physically able to safely participate in any activities relating to the nee Dance Club. Secretion of attending functions relating to the SaddleBrooke Line Dance Club, where the clease, discharge, and hold harmless the Club and its Board of Directors from auture claims and liabilities of any kind, whether for bodily injury, property loss arising out of participation in dance and any and all related activities.
G	igning this form, I certify that I am a current resident of SaddleBrooke.
Signature:	Date:
\$10.00 membersh	ate this form. Return it to the Sponsor at your first class along with your ip fee (checks preferred made payable to SBLDC).
	se Only: Date paid:/; Cash or Check (check #) Welcome Email Sent://

Revised 10/18/2023