

# INSURANCE NOTICE

ANY ADDITION TO THE CLUB ROSTER AFTER THE INITIAL  
ENROLLMENT FOR THE CURRENT YEAR                           
WILL REQUIRE AN ENROLLMENT FEE PER DANCER.

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## ADDITIONAL ENROLLMENT

<b>CLUB NAME</b>							
<b>Person Submitting Form</b>			Email				
Address		Phone					
City		State		Zip			
<b>COUNCIL/ASSOCIATION/FEDERATION</b>							
<b>PERIOD (Month &amp; Year)</b>							
<b>Name of Dancer</b>				<b>Name of Dancer</b>			

Number of Additions this Page                         

**Send one (1) copy of this form to the Affiliate Insurance Chairman with Check**