



**Café Bailar
Dance Club**

Membership Application

CHECK ONE: Membership Application Address Change Renewal

PLEASE PRINT:

Name _____ Home Phone _____ Work Phone _____

Street Address _____ City, State Zip _____

- I'd like to be notified of club functions, etc. via email.

E-MAIL ADDRESS _____

- Enclosed is \$20 for a 1 year membership to Café Bailar Dance Club. I acknowledge that Café Bailar Dance Club accepts no liability for injury occurring out of or from participation in any club meeting, class, dance or social function. I have been advised to carry my own medical and accident insurance.

SIGNATURE _____ DATE _____

Make Checks to: **Café Bailar Dance Club**

Mail to: Café Bailar Dance Club
 1850-7 Donegal Drive
 Woodbury, MN 55125

Questions? **Call:** 612-600-5129
 Email: tricia@cafebailar.com
 Tricia Wood, President of Café Bailar

Visit us at www.cafebailar.com!

For Office Use Only. Card Number: _____ Expiration Date: _____ Card Given By: _____
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