



Goldsboro, NC

## **Sugarfoot Shag Club** **Membership Application Guidelines**

Revised 07/10/21

*Thank you for your interest in becoming a part of the Sugarfoot Shag Club! If you would like to help on any of our committees, let us know as we could certainly use your help. If you have any questions, please ask any Board Member.*

### **New Members:**

- Fill out the attached Membership Application Form and sign it.
- You must have a Sugarfoot member, in good standing, sign your application as sponsor.
- Our membership year is January 1<sup>st</sup> thru December 31<sup>st</sup>.
- We have one Membership Drive each year.

January: We encourage all current members to re-up during this month. The Membership fee is \$25.

- To encourage all guests to join the club and pay the member price for entry to our parties, **you will get in free to the party the night you join with your paid membership fee of \$25, this excludes special event parties. (I.e. Mike Overman Charity Fundraiser, Shag-O-Ween, Christmas Party with band, etc.)**
- All new members are voted on at the next Board of Directors Meeting for membership into the Sugarfoot Shag Club.

### **Renewing Members & Charter Members:**

- Fill out an application if any of your information has changed so we can correct our records. Sign and return.
- In accordance with the By-Laws of the Club, any member whose dues are not paid by February 1, the Membership Committee Chair will send out written notice on such non-payment. If dues remain unpaid for thirty consecutive days thereafter, membership in the Club shall be automatically terminated.
- Our membership year is from January 1 thru December 31.
- Please renew your membership at our January Membership Drive Party by paying the \$25 Non-Charter or \$15 for Charter dues and you will **Get In Free for the party that night.**

Sugarfoot Shag Club



Goldsboro, NC

**Sugarfoot Shag Club**  
**Membership Application**

This Association is established to promote and preserve the Shag Dance and Shagging Music by Providing classes, activities, and places to party together or with another Shag Club. The purpose of the **Sugarfoot Shag Club** is to communicate the importance and preserve the heritage of the music and dance.

Name: \_\_\_\_\_ Address \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Tel#: \_\_\_\_\_ Cell#: \_\_\_\_\_ Work#: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Single: \_\_\_\_\_ Married: \_\_\_\_\_  
Mo day yr (optional)

E-Mail Address: \_\_\_\_\_

To receive Newsletter and Party Communication

Would you be interested in contributing and supporting the **Sugarfoot Shag Club** in the following capacities?

Chairing a Committee? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If "yes", what type? \_\_\_\_\_

Working on a Committee? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If "yes", what type? \_\_\_\_\_

- I, hereby, make application for membership to the **Sugarfoot Shag Club** and I agree to abide by the **Sugarfoot Shag Club** Charter, and the rules and membership requirements governing the Association of Carolina Shag Clubs.
- I, hereby, agree that **Sugarfoot Shag Club** will not be held responsible for any injury/death incurred while attending a **Sugarfoot Shag Club** function/event.
- Photos taken at functions/events, phone numbers, and e-mail addresses of said member will be used for **Sugarfoot Shag Club** business only.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Sponsor

*All Membership Applications must be approved by the **Sugarfoot Shag Club** Board of Directors. Must be 21 years of age for membership.*

**Membership Dues:**  
**\$25.00 Non-Charter Member**

*Please make your check payable to:*  
**Sugarfoot Shag Club**  
P.O. Box 223  
Goldsboro, NC 27533

**For Shag Club Use:**

**Membership approval Date:** \_\_\_\_\_

**Treasury Receipt Initial & Date:** \_\_\_\_\_