

TO: U.S.D.A. National Insurance Coordinator
P.O. Box 22
Tucker, GA 30085-0022

DATE:

**CALIFORNIA SQUARE DANCE COUNCIL
FEDERATION OR ASSOCIATION CLUB LISTING – Year 2019**

FROM:

Insurance Chairman:
Mailing Address:
City, State, & Zip:
Telephone:

Club Name:
Mailing Address:
City, State, & Zip:
Number of Members:

Facility #1 Being Used:
Street Address:
City, State, & Zip:

Name of Additional Insured:
Street Address:
City, State, & Zip:

ENDORSEMENT REQUIRED

Facility #2 Being Used:
Street Address:
City, State, & Zip:

Name of Additional Insured:
Street Address:
City, State, & Zip:

ENDORSEMENT REQUIRED

Facility #3 Being Used:
Street Address:
City, State, & Zip:

Name of Additional Insured:
Street Address:
City, State, & Zip:

ENDORSEMENT REQUIRED
