

INSURANCE NOTICE

— Club Sponsored Class — Additional Enrollment

Council : **California Square Dance Council**

Federation/Association :

Club Name :

2019 USDA # _____

Class: Beginning Date **MO/DY/YR**

Ending Date **MO/DY/YR**

(Last Name, First Name)

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| 1. | , | 26. | , |
| 2. | , | 27. | , |
| 3. | , | 28. | , |
| 4. | , | 29. | , |
| 5. | , | 30. | , |
| 6. | , | 31. | , |
| 7. | , | 32. | , |
| 8. | , | 33. | , |
| 9. | , | 34. | , |
| 10. | , | 35. | , |
| 11. | , | 36. | , |
| 12. | , | 37. | , |
| 13. | , | 38. | , |
| 14. | , | 39. | , |
| 15. | , | 40. | , |
| 16. | , | 41. | , |
| 17. | , | 42. | , |
| 18. | , | 43. | , |
| 19. | , | 44. | , |
| 20. | , | 45. | , |
| 21. | , | 46. | , |
| 22. | , | 47. | , |
| 23. | , | 48. | , |
| 24. | , | 49. | , |
| 25. | , | 50. | , |