

Submitted By: _____

Change Of Address/Transfer



Address: _____

Send Completed Form(s) to:

City: _____ State/Prov. _____ ZIP/PC _____

National Square Dance Campers Assoc., Inc.

Phone _____ Email _____

P0 Box 241

Chapter # _____ Chapter Name: _____

Butler, WI 53007-9998

Form III Rev 07/23

Make three copies: Send one to National Address, Keep one copy for your file & Give one to your chapter.

Report Date _____

A. CHANGE OF ADDRESS SECTION

New Address:

Name:		Email:	
Address:		Phone:	
City:	State/Prov.	Zip/PC	

New Address:

Name:		Email:	
Address:		Phone:	
City:	State/Prov.	Zip/PC	

New Address:

Name:		Email:	
Address:		Phone:	
City:	State/Prov.	Zip/PC	

B. REQUEST TO TRANSFER

Name:		Email:	
Address:		Phone:	
City:	State/Prov	Zip/PC	
(_ OLD_) Chapter Number # _____ (_ OLD_) Chapter Name:			
(_ NEW_) Chapter Number # _____ (_ NEW_) Chapter Name:			
Is your Former Chapter aware of this transfer? Yes/No _____			

NOTE: Complete both parts A and B if a transfer involves a change of address.