

Rev. 11-27-2022

**National Square Dance Campers
Association, Inc.
Badge Replacement Form**

I/we hereby request replacement badges as outlined below:

Chapter Number: _____ Report Date: _____

Name: (His) (First) _____ (Last) _____

(Hers) (First) _____ (Last) _____

Address: (Street) _____

(City) _____ (St/Prov) _____ (Zip+4/PC) _____

(Phone) _____

(Email) _____

Please remit \$10.00 for each safety pin back badge or \$13.00 for a magnet badge attachment. Make 2 copies. One for the NSDCA and the other one for your files.

Send this request and your remittance to:

NSDCA Membership Secretary

P.O. Box 628433

Middleton, WI 53562-8433