

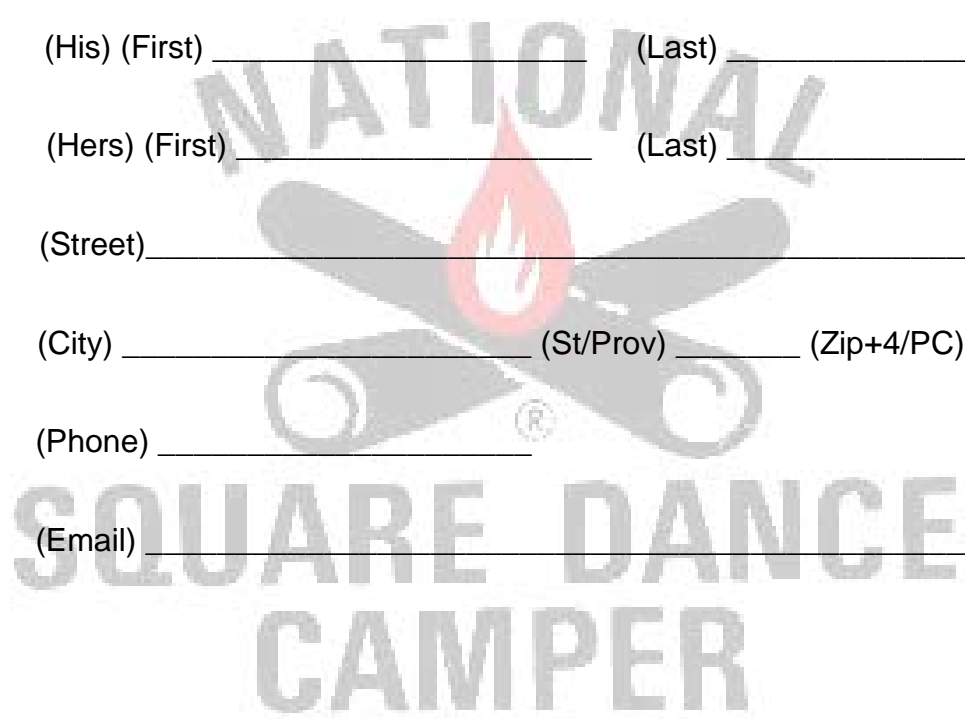
**National Square Dance Campers
Association, Inc.
Badge Replacement Form**

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 \$6.00 for each badge requested. Make 2 copies. One for 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