2025/2026 HEART OF AMERICA FEDERATION <u>CLUB INFORMATION</u>

Please complete this form **annually or whenever there are changes** in your club structure, i.e., dance location, dance night, club officers, callers/cuers, etc. Please submit this Club Information form to the Federation's Corresponding Secretary by October 1st of each year. This is your club's formal "Statement of Organization."

DATE:		DANCE LEVEL:	MS	PLUS	ADV	CHAL	RND	LINE
CLUB NAME	CLUB NAME Check box if caller run club TYPE OF CLUB MEMBERS Married Sing (MARK ALL THAT APPLY):						ngle	Youth
DANCE LOCATION:		Youth with parents or grandparents as members						
ADDRESS:	CHATTER EDITOR:							
CITY,	STATE, ZIP-CODE	Telephone:			E-M	ail		
DANCE NIGHT		AD EDITOR:Name:Telephone:E-Mail						
DELEGATE:		ALTERNATE DELEGATE:						
Address:		Address:						
City, State, Zip		City, State, Zip:						
Telephone:	E-mail:	Telephone:	Ι	E-mail				
PRESIDENT:		VICE PRESIDENT:						
Address:		Address:						
City, State, Zip:		City, State, Zip:						
Telephone:	E-Mail:	Telephone:	I	E-Mail				
SECRETARY:		TREASURER:						
Address:		Address:						
City, State, Zip:		City, State, Zip:						
Telephone:	E-Mail:	Telephone:	I	E-Mail:				
*CALLER:		*CUER:						
Address:		Address:						
City, State, Zip:		City, State, Zip:						
Telephone:	phone: E-Mail:			E-Mail:				

Club web site

Club email

*PLEASE NOTE: For the protection of the club, Callers and/or Cuers should be BMI/ASCAP licensed.