

**CLUB ENROLLMENT**  
for  
**COUNCIL GROUP LIABILITY INSURANCE COVERAGE**

The following information is needed for enrollment and must be submitted each year. Give information as it applies at time of completion of form.

**Club name** Miami Valley Folk Dancers  
**Number of individual members** 89  
**Where club dances—Place** Michael Solomon Pavilion  
**Address** 2917 Berkley Av  
Dayton OHIO  
**When club dances—Day(s) of month** Every Thursday Eve.  
**Time(s)** 7 PM to 11 PM

**Number of members belonging to OTHER Miami Valley Dance Council clubs. (Do not give names of other clubs or club members; just indicate the number of members belonging to each additional club.)**

**Number of  
Members Belonging to**

1 additional club	<u>          </u>
2 additional clubs	<u>    1    </u>
3 additional clubs	<u>          </u>
4 additional clubs	<u>    2    </u>
5 additional clubs	<u>    2    </u>
6 additional clubs	<u>    1    </u>
7 additional clubs	<u>          </u>

**Signed** *J. K. Ballinger* **Date submitted** 11 Jan 94  
**Office** Treasurer

Submit at council meeting or send to Jo Bonnell, Insurance Chairman  
53 Corona Avenue  
Dayton, OH 45419

*Mailed  
11 Jan 94*

**ENROLLMENT DEADLINE: JANUARY COUNCIL MEETING**  
Please submit a roster of club members with this form.

**PAYMENT DEADLINE: MARCH COUNCIL MEETING**  
Do not remit any payment until after the January meeting.