



Cape Fear Ballroom Dancers, Inc.

P. O. Box 1359, Fayetteville, NC 28302

www.capefearballroomdancers.org



2010 MEMBERSHIP APPLICATION New Renewal Date _____

For RENEWALS, are there any changes of: Name Address Phone Email

Name _____

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____ Cell Phone (_____) _____

Email _____

Annual membership dues (January – December) are \$50.00 per person. *Contributions are welcomed!*

Membership Dues \$ _____

Contribution \$ _____

Total \$ _____

Make checks payable to: Cape Fear Ballroom Dancers or CFBD

Please mail application and your payment to:

Cape Fear Ballroom Dancers
Attn: Membership
PO Box 1359
Fayetteville, NC 28302

For CFBD Treasurer's Use Only:

Year: _____

Check # _____

\$ _____