



Northwest Clogging Association (NWCA)

Membership Application

New ___ Renewal ___ Year _____

Membership and Insurance is good from January to December without pro-ration

Member Name: _____

Street: _____ City: _____

State/Prov: _____ Zip Code _____ Are you a Cuer/Instructor: _____

E-Mail Address: _____ Phone Number: _____

Club Name: _____ Cuer/Instructor _____

US Funds Only

Adults (USA) *Includes Newsletter and Insurance* _____ @ \$15.00 Ea _____

Dependents (USA) Insurance Only _____ @ \$ 5.00 Ea _____

Adults (Canadian) *Includes Newsletter (Insurance not available)* _____ @ \$10.00 Ea _____

Dependents – No Charge _____

Youth (Under 18) 1/2 Price of Adult Fee _____

TOTAL ENCLOSED _____

Make checks payable to: NWCA

Mail to: Glee Johnson, Membership

283 Atwater St N

Monmouth, OR 97361

(503) 931-1330 nwcloggers@gmail.com