

Concordia Aid Society (CAS)
 1129 La Crosse St.
 La Crosse, WI 54601

ANNUAL MEMBERSHIP LETTER
 (Membership Year is July 1 to June 30)
 June 1, 2023



MEMBERSHIP FORM FOR JULY 1 – JUNE 30, 2024

NOTE: Dues of \$30/PERSON by August 31, 2023, for Maintaining sustainable Membership

Thank you for your Concordia membership and participation! NOTE: If you would be willing to donate more money for Concordia’s sustainability, please indicate how much on the form below or on the Concordia website. **You can pay by credit card, check, or cash.**

- **To pay with credit card online:** go to www.concordiaballroom.com
- **To pay by check/mail:** mail the filled-out form below and your check to this address:
Concordia, 1129 La Crosse St., La Crosse, WI 54601
- **To pay in person:** bring the filled-out form and your payment to a membership meeting (7:30 pm the 3rd Tuesday of each month at Concordia) or Sunday Dance.

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Please PRINT Clearly

Name(s) of Member(s):	
Address:	
Birthdate (Used for statistical information):	
Home Phone:	Cell Phone:
EMAIL Address (for meeting updates, CAS bylaws, notices):	
\$30 Membership Dues/Person to Be Paid = \$	Extra Donation = \$

Help is needed! Check any areas which you would be able/willing to help or list your own specialty.

<input type="checkbox"/>	Volunteer Opportunities	<input type="checkbox"/>	Maintenance
<input type="checkbox"/>	Bartending	<input type="checkbox"/>	Ticket - Cashier
<input type="checkbox"/>	Marketing/Communications	<input type="checkbox"/>	Popcorn concession
<input type="checkbox"/>	Dance Teacher	<input type="checkbox"/>	Photographer
<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Decorator
<input type="checkbox"/>	Technology	<input type="checkbox"/>	Electrical/Inspections
<input type="checkbox"/>	Kitchen Work (Sunday dances)	<input type="checkbox"/>	Bake Goods for Special Occasions
<input type="checkbox"/>	(Name your skill):		

This Section Is To Be Processed by Concordia. Received on this date: _____

Membership dues of \$ _____ were paid for _____
 With Check # _____ date: _____, or On-Line (date) _____, or with CASH (date) _____

Donation to CAS of \$ _____ was made by _____
 With Check # _____ date: _____, or On-Line (date) _____, or with CASH (date) _____