**AHHS Dance Guild**

**Membership Form**

Thank you for joining the Guild and supporting our dancers.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **PLEASE PRINT CLEARLY** | | | | | | |
| **Single membership name** | | |  | | | **Dues Amt. $25.00** |
| **Joint membership names** | | |  | | | **Dues Amt. $35.00** |
| **Address** | | street city zip | | | | |
| **Email** |  | | | **Phone** |  | |

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| --- | --- | --- |
|  | **Please make checks payable to:**  **AHHS Dance Guild** |  |

**Community Member Parent Guardian Grandparent**

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| --- | --- | --- | --- |
| **Dancers Name** |  | **Level** |  |
| **Dancers Name** |  | **Level** |  |

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| **I’d like to be notified of volunteer opportunities during the year** |

**Please return with your dancer to the dance department in a sealed envelope. You may also mail the membership to AHHS Dance Department**

**4501West Fwy Fort Worth, TX 76107**

**Or sign up on line at www.ahhs.dance.com**

***\*Each membership includes a onetime 25% off our swag store and a digital copy of the dances including pictures\****

**Thank You for Your Support!**