## THE WHITE COCKADE SOCIAL AND DANCE CLUB, HAMILTON, ONTARIO 2025/2026 MEMBERSHIP FORM

1. Mr/Mrs/Ms			
_	First Name	L	ast Name
2. Mr/Mrs/Ms_	First Name	L	ast Name
Street Address:			
			Postal/Zip Code:
Email Address:			
Are you a meml (For insurance purp Cheques are pay To Membership	the monthly da ber of the RSCD poses only). yable to "The W	hite Cockade" Please fo dy Stirrat. 1268 Creeksi \$	SCD affiliation/group: YES NO brward completed form and cheque ide Dr. Oakville. Ont. L6H 4Y6 ph. 905-338-071
For office use only Paid by: cheque	e \$ cash \$	on	
		THE WHIT	TE COCKADE
1. Mr/Mrs/Ms_		AND DANCE CL 2025/2026 MEM	TE COCKADE UB, HAMILTON, ONTARIO IBERSHIP FORM  ast Name
<ol> <li>Mr/Mrs/Ms_</li> <li>Mr/Mrs/Ms_</li> </ol>	First Name	AND DANCE CL 2025/2026 MEM	UB, HAMILTON, ONTARIO IBERSHIP FORM  Last Name
_	First Name	AND DANCE CL 2025/2026 MEM	UB, HAMILTON, ONTARIO IBERSHIP FORM
2. Mr/Mrs/Ms	First Name First Name	AND DANCE CL 2025/2026 MEM	UB, HAMILTON, ONTARIO IBERSHIP FORM  Last Name
2. Mr/Mrs/Ms_ Street Address:	First Name First Name	AND DANCE CL 2025/2026 MEM	AUB, HAMILTON, ONTARIO IBERSHIP FORM  Last Name  Last Name
2. Mr/Mrs/Ms_ Street Address: City:	First Name First Name	AND DANCE CL 2025/2026 MEM	UB, HAMILTON, ONTARIO IBERSHIP FORM  Last Name  Postal/Zip Code:
2. Mr/Mrs/Ms_Street Address: City: Email Address: Phone Number: I want to receive Are you a meml (For insurance purp Cheques are pay To Membership	First Name  First Name  e the monthly dather of the RSCD poses only).  yable to "The William of the William of	AND DANCE CL 2025/2026 MEM  L  Prov/State:  Prov/State:  Solve to another	AUB, HAMILTON, ONTARIO IBERSHIP FORM  Last Name  Last Name  Postal/Zip Code: