

OREGON FEDERATION OF SQUARE AND ROUND DANCE CLUBS



MINUTES OF STATE MEETING HELD NOVEMBER 21, 1993
ROSEBURG, OREGON

State President Benjamin Brown called the meeting to order at 9:30 a.m. Past President Janet Wilken gave the invocation and First Vice President Rex Anderson led the flag salute.

All elected and appointed officers were present, with the exception of Treasurer Carolyn & John Pape and Central Oregon Delegate Marie & Bob Towe (Charlie & Sue Rich sub.). Active Goodwill Ambassadors not present were George & Bernice Gruchalla and Jack & Rosemary Williams.

Minutes were approved as mailed.

PRESIDENT BENJAMIN & PENNY BROWN thanked the Umpqua Area for hosting Saturday's potluck and dance and also today's meeting.

FIRST VICE PRESIDENT REX & SYLVIA ANDERSON thanked Delegate Rainey Groshong and the Umpqua Area for hosting yesterday's meetings and for last night's events.

OFN-Linda & Dan Bowser. November issue was 48 pages with 55% in advertizing--a profit of \$211.31. There was a typeset credit of \$692.13. We are currently in need of a Singles Editor for the Singles Corner. Subscribe to your OFN!!

SECOND VICE PRESIDENT LOWELL & DONNA CHAMBERLIN had a "get to know you" meeting with First Vice President.

RECORDING SECRETARY CATHERINE & MATTLON HICKS notes this is her seventh term as Recording Secretary and she has "The Seven Year Itch" and will not be running again for office.

CORRESPONDING SECRETARY NANCY & KEN CARSON sent get well and sympathy cards and read a thank you note from Don Reed conveying thanks for the cards, prayers and flowers for Thelma, who suffered a stroke.

TREASURER CAROLYN & JOHN PAPE were absent. Jean Brigl passed out the treasurer's report and noted that the OFN is running in the black. Catherine Hicks moved the Treasurer's report be accepted. Dorothy Dagget seconded the motion. Passed.

MEMBERSHIP TONY & LOLA ROBELLO asks that badges for the badge board be in no later than Jan. 5 to be on the board for Mid-Winter. State Membership seems to be down. Tony moved the Tall Town Travelers from Lakeview be accepted into Federation membership contingent upon completion of their papers. Nancy Carson seconded the motion. Passed.

Square Dancing is Official State Dance of Oregon

PAST PRESIDENT JANET & DOUG WILKEN have received only 4 nominations for state office. Applications with photo and election statement for OFN are due Jan. 1, and may be given to any nominating committee member. Committee will meet in closed session at Mid-Winter (room #1 West) at 2 p.m. and announce candidates in open meeting following. 1994 Fairview Dance will be April 10. Projects suggested are: Background Music System for Snack Shop Area (\$2,149.60); Outdoor Christmas Decorations (\$1070) and Wildlife Video Tapes for the Possible Building (428.38). Meeting with Patricia Mallory, Community Liaison Director at Fairview, will be in early Dec. to select the project. Patronizing Cards need to be used now to help in advertizing the 94 National.

Parliamentarian-Larry Green. Resignation was tendered today.

Publicity & State Reporter-Ed & Mary Warmoth. Suggestions are welcome for articles about the State Federation that appear in the OFN. The Portland Downtowner weekly newspaper ran a two page spread about our square dancing and plans a full convention issue for June 94 National. This goes to downtown motels, restaurants, businesses, etc. News has come to us of the death of Irene Thompson, wife of Past Oregon Federation President Tommy Thompson of Portland.

Financial Advisor-Jean & Hank Brigl. The Gypsy Squares of Rogue Sis-Q (tax exempt since 1985) have now become incorporated. The Sweet Home Squarenaders of Emerald Empire (Oregon incorporated) have now received IRS tax exemption. Clubs and area councils that are tax exempt need not file a federal or state tax return. A tax exempt club will have a 501-C? tax exempt code. A number beginning with 93-??????? does not grant a tax exemption. (Clubs are C4 or C7) Preferable C4. 1099 Misc. forms to any unincorporated company or individual receiving \$600 or more from your organization during 1993 are due the payee by Jan. 31, 1994 and due to the IRS before Feb. 28, 1994.

Education-Doug & Stacey Federson. 4 publications available from USDA are Games/Gimmicks/ Skits, A Club Newsletter-for news reporters, Class Graduation and Take the 1st Step-for beginners and others. Set of 4 is \$9. Catherine moved The Federation purchase 4 set publications for use of each Delegate and Officer, not to exceed \$250. Linda Holden seconded the motion. Passed. A library is also being built-beginning with publications "Implementing Youth Programs" and "Club Erosion" for use of all. We are waiting to be informed on the administrative hearing on the license plates.

Historian-Lou & Evelyn Benjamin. Pictures and articles are needed for the State History Book.

COMMITTEE REPORTS

Insurance-Gary & Carolyn Smith. Make sure your claims are correctly filed!! Suggested revisions to Practices & Procedures were passed out and discussed. A comparison was also given between our insurance and that of Washington State. President requested that Insurance Chairman meet with Practices & Procedures Committee (Doug Federson, chmn.). He also noted that insurance does not now cover picnics, etc. Catherine moved a committee be appointed, with Gary Smith as chairman, to look into the possibility of moving into a different insurance policy. Rex Bounds seconded. Passed. Top 3 pages will be mailed with minutes of report. Rest is in permanent record with minutes.

BMI/ASCAP-Ralph & Linda Lambert. No report.

1994 National-Don & Shirley White. Club ads are available for \$15 to be included in the Official Program Book, which will be a remembrance of the 94 National (about the size of When & Where). We are also still soliciting ads from businesses, etc. Deadline is Jan. 15. Submit the ads to Cecil Jones-12190 S W 69th Ave-Tigard, Or. 97223-2504.

New registration forms and fliers are out showing Ronnie Milsap, who is replacing Charlie Pride. Throw away your old registration forms, please.

To work on a committee for National you must be registered for 94 National Convention. Let's promote this. Registration to date is only 2630 from Oregon.

Next Convention open meeting will be Jan. 15, 1994 at 10 a.m. at the Monarch Motor Inn, off I-205 (near Clackamas Town Center). There will be no meeting at Mid-Winter.

Thanks were conveyed for the honored position of the picture on the cover of the new directory.

Youth Activities Coordinator-Sandra & Richard Finch. Absent. No report.

State Fair-Ken & Ardelle Wolf. No report.

State Trailer Coordinator-Jim & Avis Kincaid. Absent. No report.

ORDTA-Ray & Virginia Walz. Absent. Last meeting was in Eugene with 1994 Round Dance Committee. Educational portion was on Roundalab and what it has to offer. Roundalab annual meeting will be in Portland-Sun., Mon. and Tues. prior to 1994 National. ORDTA members agreed to co-host the ROSE CITY BALL--the Saturday Night Round Dance Party at National.

Round Dance Screening-Hope & John Anderberg. All areas now have Round Dance Coordinators who will stay in place until replaced by a letter from the Area President. Round of the Month for Dec is My cup Runneth Over-Blue Mountain; for Jan. is Some Day-Central Oregon; for Feb. is Oh Yeah-Eastern Oregon.

Delegate Meeting-Rainey Groshong. Delegates felt there is need for a clarification as to who flowers and cards are sent to from the State Federation.

President Benjamin Brown appointed Del Fleming to act as the Parliamentary Pro-tem.

OLD BUSINESS

mtn Catherine Hicks moved to take off the table the motion regarding changes to Constitution, By-laws and Practices & Procedures from last meeting. Rex Bounds seconded. Passed. Dorothy Daggett moved the Practices & Procedures changes be tabled until Jan. meeting. Rex Bounds seconded. Passed. Doug Federson will submit final copy for consideration then. Any clubs or organizations wanting a change please notify Doug by Jan. 1. Dorothy Daggett moved we accept the By-laws changes as presented. Janet Wilken seconded. Passed. President directed Corresponding Secretary to prepare and send ballots to the clubs. First reading of Constitutional changes was accepted, as presented to officers and delegates.

mtn Wood Award. Janet Wilken moved the report on the Wood Award be accepted into Practices & Procedures. Lowell Chamberlin seconded. Figures used are based on pre-registration for Mid-Winter. Jean Brigl asked if the Woods could be contacted regarding the position of the smaller clubs. Catherine Hicks moved this be tabled until Jan. meeting. Motion was seconded by Linda Holden. Passed.

Randall Award. Del Fleming recommended the board to choose the recipient be comprised of the 13 Area Delegates and Mid-Winter Chairperson, who would vote only in case of a tie. At the Sept. State Meeting the Mid-Winter Festival Chairperson will distribute nomination forms to the delegates, to be returned by Nov. State Meeting. Within one week, Mid-Winter Chairperson will mail to each delegate a ballot copy of each of the nominees, to be returned by Jan. 10. Forms will be used instead of "submit in your own words". Recipient name will be engraved on a perpetual Randall Memorial Plaque. This will be presented to them by the Mid-Winter Festival Chairperson as a part of the Grand March Ceremonies. This will remain in their possession until the following Mid-Winter Festival, at which time they will receive a commemorative personal plaque.

Each council may submit one nominee. Councils are not obligated to participate but we hope they will.

mtn Dorothy Daggett moved we also add-all nominees be recognized in some form--such as an article in the OFN. Seconded by Charlie Rich. Passed.

Del Fleming will bring these changes to Jan. meeting for approval.

THERE WAS NO NEW BUSINESS

DELEGATE REPORTS

Blue Mountain-Dorothy & Charlie Daggett. Indian Valley Paraders classes are Sun. afternoon, Star Promenaders Thurs. evenings. Alpine Twirlers may combine lessons with Sat. Evening dances to save costs. Elkhorn Swingers report 10 students. 1988 Summer Festival is being discussed a lot. Flyers are ready for 94 Trails Thru for National.

Central Oregon-Marie & Bob Towe (Charlie & Sue Rich sub.). We miss OUR SNOWBIRDS. Swinging Mountaineers begin Plus Workshops in Jan. The Red Rocks sponsored Halloween Council Dance (with Snow White & 7 Dwarfs). Visitor brochures were again distributed to Chamber of Commerces, RV Parks, Motels and Restaurants.

Eastern Oregon-Linda & Bob Holden. Grand Squares of Ione hosted the Oct. Council Meeting and Dance, and also provided entertainment for UCC Autumnreast. Muddy Frogs have 16 students. Haunted House Costume party was in Oct. and FoodBank & Toys for Tots Dance in Nov. In Dec. they will host next Council Dance. Rocket Squares of Fendleton are having workshops and lessons. Square Knots have 6 Round Dance beginning couples. About \$1200 was made at Boardman Rest Area (2 weekends) in Oct. Rocket Anniversary Dance was last of Oct.

Emerald Empire-Dave & Betty Cameron. Fern Ridge Twirlers hosted Nov. Council Dance at Veneta. Plans are made for New Years dances and benefit dances upcoming. Prayers are needed for Don & Thelma Reed.

Interstate Highlanders-Helen & Don Shreiner. Classes seem to be smaller but enthusiastic. K.C.s thank all who attended Potato Harvest Dance with Les Seeley. K.C.s and Happy Huggers will have a combined Christmas Dance. Happy Huggers hosted Oct. council dance and Tule Twirlers will host Jan. council dance. Happy Holiday Season.

Lincoln-Tillamook-Nancy Morrissey. Cheddar Squares hosted their 1st Area Meeting and Dance at Kilchia Grange Oct. 30. They will not have record dance night but will have 1 guest caller per month--go dark Dec. 3 & 17. Coast Swingers of Garibaldi (dark Dec. 24) will host new dancers dance with Hayshakers. Toledo 49ers and Newport Chamber of Commerce thank all who participated in Crab Walk Sashay. New caller for Sunset Squares (dark Dec. 25) is Charlotte Jeskey, calling 4th Sat.--guest callers on 2nd Sat.

Mid-Willamette-Shirle & George Gierloff. Clubs are hosting New Dancer Dances. Fall Festival Dance had 23 squares with 24 area clubs represented. Harold Kleve will not be calling for now due to the illness of his wife, Leota.

Portland-Lola & Tony Robello. Council will have a Christmas Dinner in lieu of Dec. Delegate meeting. Many donated blood for Mary Kay Jones (B & Bs and past owner of Carrie B's) who has since died. Red Cross had a Blood Bank at Oak Grove Comm. Club for her and dancers helped. Contributions to Mary Kay Jones Memorial Fund will be used for a plaque to deserving area dancers and to assist area clubs in need. Charter member of Rivergate Stompers and Ambassador Squares Len Schwager (Jeri) has died. Swap & Swing of The Dalles will clean a section of hiway in Adopt a Highway Program. Council President Gary Weidemann & Helen Clark were married this month.

Rogue Sis-Q-Rex & Jeri Bounds. Council donated \$820 to the two Square Dance Halls in the council to help improve their halls. Oldest Square Dance Club in Oregon, the Shamrocks, are only holding a Birthday Dance this year and no monthly dances. Loren Cochran called for Twirlers Birthday Dance and then returned to his new Alaskan home. Jim Diffey from Calif. contracted to call for Southern Oregon Star Promenaders. He has broken his contract and left. Wayne Weaver will now call for them, Southern Oregon Singles and Gypsies. Midway New Student Dance will be at Josephine County Square Dance Center.

South Coast-Karel & Don Morris. Port Orford Beachcombers sponsor a new line dance class taught by Steve Hoisington (Saints-n-Aints) with 30 to 50 dancers each week. Rainbow Cloggers will participate in 10th National Clogging Convention in Nashville and also perform at Opry Land Hotel. 4000 Cloggers are expected. Saints-n-Aints will have a Christmas dance and a Beginner dance in Dec. Skyloft Squares will have a potluck and show square dance attire and make available patterns to trace, trade or borrow. New Years dances are also planned in the area.

Sunset Empire-Ken & Eva Moore. Chinese food was "Out to Dinner" menu for Nov. with 18, hosted by the Shoops. Fireballs caller John Anderson called in Oct and they stole Hayshaker banner. In Nov. Hayshakers went to Scappoose and retrieved it. They also visited Promenaders Hard Times Dance. Indian Summer Dance in Oct. had 12 squares. Del Niemi was in Longview Hospital in Oct. but is now better.

Tualatin Valley-Beth Christensen. Council broke off all relationships with Wash. Co. Fairboard and moved Oct. 31. Cost of maintaining building was too high. A copy of State Federation Practices & Procedures will be given to each club for presidents use. Don't forget hugs and smiles for new dancers. Merry Christmas and happy dancing!!

Umpqua-Rainey Groshong. What a pleasure to have you here for the meeting. Come again soon. Lessons are doing well. All clubs have had Halloween and Special Dances and are looking forward to Holiday Dances.

ACTIVE GOODWILL AMBASSADORS

George & Bernice Gruchalla. Absent. In Arizona

Jim & Marge Neely. Applications for 94 National are being given to every one we meet.

Ed & Mary Warmoth. No out of state trips recently but have plans for spring. Have had lots of calls & letters from dancers planning to come to Oregon in June of 1994.

Don & Shirley White. Have been to South Carolina and Louisville for some special dances and this is helping promote our registration. Remember to destroy old registration forms with Charlie Fride on them.

Jack & Rosemary Williams. Absent. Report they have been helping with new dancers. Russ Kiel (first caller we danced to) has returned from Calif. and is calling for our new dancers.

Good of the Order

Gary Smith suggests we might contact our legislators with the idea of constructing community centers in small areas for functions such as ours and other community doings.

Bill Mosier is selling Kuala Bear Christmas Tree Ornaments from Australia for \$4. Proceeds will be used for purchase of give away gifts for National 94.

Do you have your cookbook yet?

Meeting adjourned.

Respectfully submitted,

Catherine Hicks

Catherine Hicks
Recording Secretary
Oregon Federation of Square & Round Dance Clubs

Directory Corrections

pg 6--Benjamin & Penny Brown 590-5008 pg 44-Gary Weidemann 649-0460

pg 52-Swingin Saints moved to: pg 53-Windy Whirlers Delegate
St. Henry Parish Hall Mary Miller 771-8121
NW 1st & Aua-Gresham

pg 58-Council Officers:

Pres: Gene Hiserote (Donna) ph 269-1403
1420 Thompson Rd. Coos Bay 97420

Sec: Vonnie Nordquist (Larry) ph 756-0606
1767 Garfield North Bend 97459

Del: Karel Morris (Don) ph 756-6627
3373 Brussels North Bend 97459

Meet 5th Sat. 7pm Dance 8pm--Alternating clubs

A Merry Christmas & Happy New Year to all!!!

**OREGON FEDERATION OF SQUARE AND ROUND DANCE CLUBS
FINANCIAL STATEMENT FOR PERIOD ENDING OCTOBER 31, 1993**

	Beginning Balances	**Receipts	**Disbursements	**Ending Balances
TOTAL FEDERATION	51,171.33	10,946.85	12,780.44	49,337.74
RESTRICTED FUNDS				
Mid-Winter Fest	4,000.00	-0-	-0-	4,000.00
Festival Loan	4,000.00	-0-	-0-	4,000.00
Contingency	2,000.00	-0-	-0-	2,000.00
Insurance				
Administration	895.18	-0-	100.00	795.18
Festival Fund	2,958.22	-0-	-0-	2,958.22
Club Premiums	-0-	-0-	-0-	-0-
OR Fed'n News	9,676.45	9,042.10 *	8,125.95	10,592.60
DESIGNATED FUNDS				
Fairview Fund	444.04	100.00	-0-	544.04
'94 Nat'l Fund	83.19			83.19
Teen Fund	421.85			421.85
OPERATING FUNDS				
General Fund	26,692.40	1,804.75	4,554.49 *	23,942.66
CASH ON HAND				
Checking/Savings	44,041.33	14,120.42	12,824.01	45,337.74
Bank of America				
(28598-00879)	3,682.37		3,682.37	-0-
Accts.Receivable	-552.37	552.37	-0-	-0-
Accts.Payable				
Mid-Winter Acct.	4,000.00			4,000.00
1st Interstate				
(396-004642-6)				
TOTAL CASH ON HAND	51,171.33	14,672.79	16,506.38	49,337.74

*Reflects Interfund
Transfers for OFN
\$508.80.

**OREGON FEDERATION OF SQUARE AND ROUND DANCE CLUBS
FINANCIAL STATEMENT FOR PERIOD ENDING OCTOBER 31, 1993**

SEPTEMBER **OCTOBER** YEAR TO DATE** BUDGET 1993/1994 % OF BUDGET

GENERAL FUND

RECEIPTS

Dues				400.00	
Directory Sales	1,700.10		1,700.10	2,200.00	77
Festivals				8,950.00	
Miscellaneous	11.00		11.00	100.00	11
Interest Income	48.22	45.43	93.65	500.00	19
TOTAL RECEIPTS GF	1,759.32	45.43	1,804.75	12,150.00	15

DISBURSEMENTS

Supplies	3.79		3.79	250.00	1
Postage	93.35	150.40	243.75	750.00	33
Printing	420.84		420.84	500.00	84
Telephone	96.11		96.11	300.00	32
Motel	440.00		440.00	1,800.00	24
Mileage	843.20		843.20	3,850.00	22
Directory Print.		1,806.00	1,806.00	2,100.00	86
Miscellaneous	146.79		146.79	300.00	49
SUB-TOTALS	2,044.08	1,956.40	4,000.48	9,850.00	41

SPECIAL PROJECTS:

State Fair Dance				400.00	
Trailer Improvements				100.00	
Festival Advisory				100.00	
Leadership Seminar				500.00	
OFN Adv./Articles	90.00	90.00	180.00	2,300.00	8
'94 Adv./Articles	164.40	164.40	328.80	2,500.00	13.00
New Dancer Issue				1,000.00	
Financial Advisor	45.21		45.21	150.00	30
Historian				100.00	
Brochures				100.00	
Grant					
TOTAL SPECIAL PROJECTS	299.61	254.40	554.01	7,250.00	8
TOTAL DISBURSEMENTS GF	2,343.69	2,210.80	4,554.49	17,100.00	27
			-2,749.74	-4,950.00	

INSURANCE

RECEIPTS

Summer Festival				-0-	
Winter Festival				1,750.00	
Club/Area Premiums				11,950.00	
Administrative Fund				600.00	
TOTAL INSURANCE RECEIPTS				14,300.00	

DISBURSEMENTS

Officer's Bond					
Premiums Paid USDA				13,700.00	
USDA Membership	100.00		100.00	100.00	100
Administrative Fund				500.00	
Club/Area Premium Adj.					
TOTAL INS. DISBURSEMENTS	100.00		100.00	14,300.00	1

**OREGON FEDERATION OF SQUARE AND ROUND DANCE CLUBS
FINANCIAL STATEMENT FOR PERIOD ENDING OCTOBER 31, 1993**

SEPTEMBER* **OCTOBER* YEAR TO DATE** BUDGET 1993/1994 % OF BUDGET

OREGON FEDERATION NEWS

RECEIPTS

When and Where				900.00	
Advertising	3,439.50	2,218.80	5,658.30	31,250.00	18
OFSRD Articles/Advert.	90.00	90.00	180.00	2,300.00	8
'94 Articles/Advert.	164.40	164.40	328.80	2,500.00	13
New Dancer Issue				1,000.00	
Subscriptions	1,605.00	1,270.00	2,875.00	21,000.00	14
Miscellaneous					
TOTAL RECEIPTS OFN	5,298.90	3,743.20	9,042.10	58,950.00	15

DISBURSEMENTS

Supplies				550.00	
Printing-Regular Edition	3,760.95	2,995.40	6,756.35	50,500.00	13
-Special Edition				1,000.00	
Postage	1,218.85	4.54	1,223.39	6,000.00	20
Telephone	46.26		46.26	400.00	12
Miscellaneous				200.00	
Software	99.95		99.95	200.00	50
Hardware					
Photography				100.00	
Advertising Refunds/Adj.					
Subscript. Refunds/Adj.					
TOTAL DISBURSEMENTS OFN	5,126.01	2,999.94	8,125.95	58,950.00	14

Net Income

	172.89	743.26	916.15		
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STATISTICS

Copies Printed:	2100	2100	4,200.00		
Printing Expense	4,550.00	3,553.00	8,103.00	Cost @ Issue	1.93
Less Paper Allow.	-128.80	-101.20	-230.00	Savings @ Issue	-0.05
Less Typeset Allow.	-660.25	-456.40	-1,116.65	Savings @ Issue	-0.27
Net Printing Expense	3,760.95	2,995.40	6,756.35	Cost @ Issue	1.61
Postage Expense	366.17	348.55	714.72	Cost @ Issue	0.17
Total Expense	4,127.12	3,343.95	7,471.07	Cost @ Issue	1.78
Cost Per Issue	1.97	1.59	1.78		

Miscellaneous Expense	146.21		146.21		
Misc. Cost Per Issue	0.07		0.07		

Total Cost	4,273.33	3,343.95	7,617.28		
Total Cost Per Issue	2.03	1.59	1.81		
Number of Pages	56	44	100		
Cost Per Page	76.31	76.00	76.16		

Advertising Income	3,439.50	2,218.80	5,658.30		
% Adv. Covered Cost	80.00%	66.00%	74.00%		

Subscription est. \$1.00					
Subs. Mailed	2,013.00	2,033.00	4,046.00		
% Subs. Covered Cost	47.00%	61.00%	53.00%		

Percent of Issue Paid	127.00%	127.00%	127.00%		
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Directory Printing	1,806.00				
1600 Printed/Cost Per	1.13				

New Dancers Issue					
2500 Printed/Cost Per					

CORRESPONDING SECRETARY REPORT FOR OCTOBER & NOVEMBER 1993
BY NANCY & KEN CARSON

Get Well Cards sent to the following:

1. Clyde Charters
2. Jan Shidler - knee surgery
3. Camille Irion, 813 S. 5th, Coos Bay 97420 - cancer
4. Thelma Reed, stroke
5. Del Niemi, heart attack
6. Thelma Reed - flowers and card - stroke

7. *Don Hartwig*
8. *Warren Engdahl*

Sympathy cards sent to the following:

1. Mattlon Hicks, brother passed away.

RECEIVED CORRESPONDENCE FROM DON REED - Regarding Thelma. He conveyed their thanks To the Oregon Federation and all of their friends for their prayers, thoughts, and good wishes. Also for all of the cards, calls, and flowers.

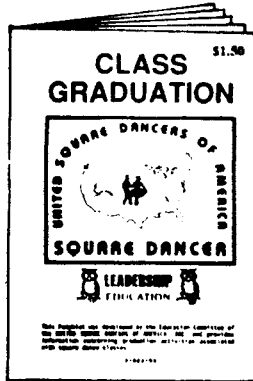
RECEIVED FROM SOUTH COAST AREA COUNCIL - Listing of their Council Officers for the State Directory.

P R E S S R E L E A S E

COPIES MAY BE OBTAINED FROM:

USDA EDUCATION PRODUCTS

Joe & DeAnn Hutchinson
 USDA EDUCATION CHAIRMAN
 Rt. 2, Box 469
 Salina, OK 74365
 (918) 479-6117



\$1.50

36 Pages

4 1/4" X 5 1/2"

The "How To" pamphlet for Class Graduations. Contents include: The Graduation Party, Planning Graduation Ceremonies, Graduation Games, Tests, clip Art, Club Invitation, Pledge Card, Welcome Packet, Diploma, Refreshments, etc. Designed to assist club leaders in the planning and conduct of successful Club Graduation Ceremonies.



\$1.50

48 Pages

4 1/4" X 5 1/2"

The "How To" pamphlet for Newsletters. Purpose, Design, Content, Size, Format, Name, Body, Alignment, Captions, Margins, Rules, Writing, Sources, Styles, Proofreading, Copyright, Label, Assembly, Photos, Clip Art, Graphics, Ads, Fliers, Printing, Circulation, Mail List, Editor Tasks, Story Form, Specification Sheet, Checklist.



\$3.00

40 Pages

8 1/2" X 11"

The "How To" booklet to expand and enhance the development of square dance entertainment. Contents include 98 different games, gimmicks, and skits that will put "FUN" into your Club. Ideas to liven up and put fun into square dance functions. From these ideas, many new fun games and gimmicks can be recovered and presented to bring club members together into a family fun unit. It will inspire callers and cuers to pull out their bag of tricks and gimmicks to make each dance a memorable event.



\$3.00

42 Pages

8 1/2" X 11"

The "How To" booklet designed for Club Leaders to use during lessons to teach new dancers more about the square dance world. Contents include 17 pertinent topics covering the world of square dancing including material suitable for handouts. Topics include Square Dance Courtesy, Do's & Don'ts, 10 Commandments for Square Dancers, Human Relations, Good Listening, Responsibilities of Members & Officers, History, Associations, Conventions, Organizations, Visiting, Travel, Publications, Smooth Dancing, etc.

Oregon State Federation of Square & Round Dance Clubs
Insurance Chairman
Gary & Caroline Smith
38235 Marcy Street
Sandy, OR 97055

Items of Discussion

- I. Injury Report: Oct 19, 1993 Charlie Brown Squares, plus lessons, Claim Submitted but, this could be refused by the carrier. Form submitted said lessons were from Jan - June from 7:00 - 9:00 pm, this accident happened at 6:00 pm in the middle of October. We need to get the paper work write. Right!!
- II. Several Clubs have not renewed Insurance yet.
Must have it in by next weekend at the very latest for us to be able to get it in the mail by Dec 1.
- III. Revisions to the Practices and Procedures
- A. Section VII-7
 - 1. Annual Solicitation Item 1b, line 45... "November" change to "October"
 - 2. Item 1c "should" change to "should not"
 - B. Section VII-9
 - 1. General Info; Item 6, line 37 - 40 Clubs without USDA coverage must co-insure Oregon Federation for \$1,000,000.00 Liab. Muddy Frogs insure through the WA. State Federation, and insurance co. says they cannot issue a certificate naming the Oregon Federation as an also insured because of the liability. (Recommend changing the phrase "co-insured Oregon State Federation for \$1 million dollars liability as co-insured" to "provided Oregon State Federation with proof of insurance of not less than \$1 million dollars liability".....
 - C. Item 7; need clarification of same problem. (Recommend changing "...Co-insured Certificate is submitted to Insurance Chairperson for \$1 million liability." to, "....the non-member club has provided to the Insurance Chairperson, proof of insurance in an amount not less than \$1 million dollars liability.

- IV. Financial Security of our Insurance Funds (We offer the following three guidelines as suggestions)
- A. Protection from Sudden Rate Increases (Guideline)
 - 1. Festival Funds (set a minimum balance) Suggest \$.15 per member.
 - B. Member Fund Balances (Guideline)
 - 1. Be made refundable if club leaves Federation
 - C. Administrative Funds (Guideline)
 - 1. Allow the Admin Fund to continue to accumulate as a security measure for emergency purposes.

We feel that these 3 guidelines would secure a stable and steady ability of the fund to meet our future Insurance needs without having to juggle things if we were to be hit with a larger than normal rate increase.

- V. 1994 Square Dancers Insurance Program (Attached Handout)
- A. Please note the second paragraph on the front page, "Remit by Dec. 1, 1993."
 - B. Pages 1,2,3,4 explain the coverage, what's covered, and what's not covered.
 - C. Page 5 explains "Additional Insured" and "Group Travel".
 - D. Page 6 is a suggested check list for a rented facility.
 - E. Page 7 is the USDA code of conduct.
 - F. Page 8 explains proper procedures for filing a claim.
 - G. Page 9 is the claim form.

- VI. Revised Forms submitted for adoption into the Practices and Procedures.
- A. Oregon Insurance Form (Year)
 - B. Notification of an Event, with modifications.
 - C. When duplicating forms on your computer-- PLEASE check it over very carefully. Someone duplicated the 1994 Oregon Ins. Form and got our address wrong. They had MARCH st. instead of MARCY St.

- VII. Comparison of Policy (Sedgwick James)
- A. Washington State Federation Policy
 - 1. Part 1: General Liability
 - a. Limit \$1,000,000.00 per occurrence (Same)
 - b. Aggregate Limit \$2,000,000.00
 - c. Fire Damage \$50,000.00 (Same)
 - d. Medical Expense \$5,000.00 (Less)
 - e. Non Owned & Hired Auto Liab. \$1,000,000.00 (Includes parade)

floats)

2. Part 2; ADD--Accidental Death & Dismemberment
 - a. Loss of Life, Limb, Sight, or Hearing--- \$5,000.00
 - b. Medical & Dental \$2,500.00
 - c. Coverage includes to or from, or while participating in Sanctioned activities. Includes Members & Students.
 - d. Coverage applies to excess over and above any other insurance that each person has.
 - e. Need to have 100% of the members of any participating club

3. Premium:
 - a. Part 1 = \$5954.00
 - b. Part 2 = \$7200.00 to \$8200.00 depends on past claim history
 - c. Renewal in November
 - d. will furnish a three year history with total claims paid, total amount paid, and a % ratio so we know how we are matching up to the normal.

The Time Has Come...

TO ENROLL IN THE 1994 SQUARE DANCERS INSURANCE PROGRAM

THE PREMIUM FOR THE 1994 INSURANCE YEAR, JANUARY 1 THROUGH DECEMBER 31, IS \$2.10 PER MEMBER. THE MINIMUM FEE FOR A CLUB IS \$32.00.

PLEASE REMIT APPLICATION AND CHECK FOR PREMIUM BY DECEMBER 1, 1993 TO RECEIVE FULL TWELVE MONTH COVERAGE.

IF YOU HAVE QUESTIONS OR NEED ADDITIONAL INFORMATION, CONTACT:

HOWARD & LORAIN BACKUS
USDA NATIONAL INSURANCE COORDINATORS
P. O. BOX 1365
PINE BLUFF, AR 71613

PHONE: (501) 534-2264
FAX: (501) 534-4679



ARE YOU DANCING UNINSURED?

Every square dance organization needs General Liability and Accident Medical Expense coverage while conducting and sponsoring dance activities. As closely as safety rules are followed, accidents can and will happen. This insurance program was specially designed for USDA dance groups. It provides for \$1,000,000 liability and \$10,000 accident medical reimbursement coverage plus other advantages, such as certificates of insurance for special dances (including provision for additional insured, or when required by a property owner) at no additional cost. This is becoming increasingly more important as more owners or public and private facilities demand that groups show proof of liability insurance before they will be allowed to use the facility.

LIABILITY INSURANCE

Limits of protection: \$1,000,000 combined single limit of liability for bodily injury and property damage per occurrence (subject to a \$100 property damage deductible per claim) while participating in scheduled and sponsored dancing activities.

Who is covered: The club and its members while participating in club or organization sponsored and supervised dancing activities.

ACCIDENT MEDICAL INSURANCE

Limits of Coverage:

- \$10,000 Accident Medical/Dental Accident Expense
- \$ 7,500 Accidental Death
- \$ 7,500 Dismemberment Benefit for loss of both hands, arms, eyes
- \$ 3,750 Dismemberment Benefit for loss of one hand, arm, eye

Note: Coverage is excess over any other valid and collectible insurance covering the same accident.

Who is covered: Club members while participating in any regularly scheduled and sponsored dancing activity, worldwide, including group travel in a commercially licensed common carrier vehicle operated by a person holding a valid operators license for such vehicle while being transported to or from a covered dancing activity which is a minimum of 25 miles from point of origin to destination (one way).

What is covered: Accidental bodily injuries sustained while participating in dancing activities sponsored by a recognized club or organization, for a period of one year from the date of the accident.

Period of coverage: The insurance year is January 1 through December 31. It is important every club effect coverage in December to receive the full 12 months coverage. There is no pro-rate provision. This is necessary due to the large administrative expense of maintaining different policy dates.

Cost of program: A very low \$2.10 per member per year. All members of a club, as of date of application, must be enrolled.

ADDITIONAL INFORMATION

1. Roster of club members is required at time of premium payment.
2. If a club member belongs to more than one club, they pay only one enrollment fee.
3. Any later changes in the club roster, whether up or down, will not require additional reporting or enrollment fees.
4. If club members leave the club and fail to join another participating club within 30 days, their insurance coverage ceases.
5. Classes sponsored by a club will be covered without additional cost.
6. The minimum fee for a club is \$32.00.
7. The policy does not cover the caller and his or her equipment when he or she is calling.
8. An honorary member or caller member of a club is covered by this policy only when attending a dance as a dancer.
9. Name, address and phone number of each facility anticipated to be used during the year will be required when effecting coverage.
10. Approximately 45 days lead time is required to obtain a certificate of insurance for a particular facility not on the original policy.
11. Provides \$50,000 legal liability in the event of a fire which is alleged to be caused by an insured dance organization.
12. Picnics, camp outs, snow trips and other non-dancing activities are not covered by this insurance. Special and one-event accident medical insurance must be separately arranged.
13. Claims must be filed, whenever possible, within 20 days from the date of the accident with medical bills attached. Mail claims to the affiliate insurance chairman.
14. The death and dismemberment benefit applies regardless of any other insurance the member may have. Death must result from a covered accident at a bonafide club or organization dancing activity or an accident during the course of group travel (see definition of group travel).
15. Coverage is excluded while dancing at private residences.

PART I

Personal Injury and Property Damage Liability Protection

Limits of Protection - \$1,000,000 combined single limit of liability for bodily injury and property damage each occurrence (subject to \$100 property damage deductible per claim) while participating in scheduled and sponsored dancing activities. \$50,000 limit for Fire Legal Liability (rented or leased premises). There is a limit or "aggregate" of \$1,000,000 for all product liability claims combined. This includes products liability for food or beverages served at a dance (e.g., when a person claims that, after eating food, he or she became ill and needed medical attention which resulted in medical expenses).

Who is Covered as an Insured

The club and its members are covered while participating in club or organization sponsored and supervised dancing activities, including clogging, contra, round, folk, line and heritage dancing.

What is Covered

Bodily injury and property damage for which the insured is held legally liable, excluding property in the care, custody or control of the insured. The policy provides legal defense, in the event that a suit is brought by a guest for injuries alleged to have been caused by negligence of the club or the affiliate and for damage allegedly caused by the club or the affiliate. Defense is provided if someone should claim that he or she was libeled or slandered or suffered defamation of character by an officer while performing his or her duties as such.

Public Exhibitions

Exhibitions in the United States, its territories or possessions and Canada are covered by the liability policy whenever such exhibition is sponsored by a club or member affiliate, provided that all participants at such are members of the insurance program. Whenever possible, thirty days advance notice of any special event such as exhibitions, change of location of dances, meetings or other events should be given to the affiliate insurance chairman. This is for his or her records, a necessary item if a claim were to be made later.

Whenever possible, 45 days advance notice should be given to the affiliate insurance chairman of any event which requires a certificate of insurance, especially when an additional insured endorsement is requested. The request must include the full name and address of the facility, date or dates it will be used*, the name or names which are to be included as additional insured(s), as well as separate address and phone number if not the same as the facility's. The affiliate insurance chairman will, when everything is in proper order, relay this information to the USDA Insurance Coordinators.

*If a club or affiliate plans to use a facility more than once during a calendar year, and if the managers or owners require that they be included as an additional insured, please obtain all of the dates that the facility will be used. No additional fee is charged for additional insured certificates.

PLEASE NOTE: LESS THAN 14 DAYS ADVANCE NOTICE MAY MEAN THAT THE CERTIFICATE CANNOT BE PREPARED IN TIME FOR THE EVENT.

The program does not cover the caller or his or her equipment. If a member or guest sustains an injury which is caused by the caller or his equipment, the caller's insurance will be required to respond to the claim. However, it should be noted that it is the practice of attorneys to name all parties as defendants in a suit (whether directly or indirectly involved). For example: callers, club officers, members and the association of which the club is a member.

In the event any person is injured at any club or affiliate event, or damage is done to the facility or its contents by a member or a guest, the club or affiliate president or a responsible person shall file with the affiliate insurance chairman a complete report of the accident, specifying the cause (if known), the person or persons hurt and a description of any property which was damaged, including the names and addresses of witnesses, all within twenty days of the date of occurrence.

PART II

Accident Insurance

This insurance is for members accidentally injured while participating in or attending a dance event sponsored by a recognized club, affiliate, or association anywhere in the world. This includes people in beginner classes.

The benefits provided are: \$7,500 accidental death, \$7,500 accidental dismemberment and \$10,000 accident medical expense. The accident medical expense benefit is excess, over and above the individual's personal medical coverage.

A claim must be filed (forms are provided) with the affiliate insurance chairman within 20 days from the date of accident. The claim form should be completely filled in; all questions answered. The doctor's report and any bills (if available) should accompany the form. If a member has other insurance which covers medical expenses resulting from injuries, the USIDA insurance will consider all covered costs not paid by the member's primary carrier, up to the limits of the policy. Please be advised that the claim will be processed more efficiently if the letter of denial or explanation of benefits from the primary carrier are included with the claims material. The accidental death and dismemberment provisions are not affected by any other insurance.

An honorary member or caller member of a club is covered by this policy only when participating as a dancer. A caller, whether a member of a club or not, is not covered by this insurance when calling at his or her club, other clubs, or elsewhere.

No one is covered by this insurance while attending and/or dancing at any dance sponsored by a private individual or private group. The low cost for this insurance has been obtained by assuring the insurance underwriters that the square dance code of ethics will be observed at all dances and dance related events. To extend coverage to privately held dances or those not conforming to the code of ethics could result in a reduction or cancellation of benefits, or a material increase in the cost.

Picnics, camp outs, snow trips and other non-dancing activities are not covered by this insurance. Special, single event insurance should be arranged for such.

It must be understood that, by participating in this program, we are assuring the underwriters that 100% of the club membership, as of the date of the application, is enrolled. They reserve the right to audit your records at any time.

All letters, forms, guides and records are for the use of the insurance chairperson during his or her term of office. At the conclusion of each term, these must be passed on to the new chairperson.

This is a summary of coverage. If there is any conflict between the provisions of this brochure and those of the Master Policy, the provisions of the Master Policy will govern.

EXPLANATION OF ADDITIONAL INSURED

Name(s) of Additional Insured - means the property owner(s) or organization who wants their names added to your liability insurance policy. Normally, this differs from the name of the facility which you are using or the location of that facility. If not requested by the owners, leave blank.

Facility being used - means the name of the facility and complete address of the actual location for the event. This must include street (and number, if applicable), city, state and zip.

Date(s)- means special dates. For regular dances:"every Saturday" or "first and third Mondays", etc. For special dances, give the exact date.

PLEASE TYPE OR PRINT WITH A BALL POINT PEN.

Attach club roster with enrollment form.

DEFINITION OF GROUP TRAVEL COVERAGE UNDER THE UNITED SQUARE DANCERS OF AMERICA ACCIDENT MEDICAL POLICY

Group travel coverage shall be afforded under this policy subject to the following considerations:

- A group shall be defined as 10 or more covered members of the USDA insurance program.
- Coverage will commence upon departure from a single common meeting point and continue in force during scheduled, sponsored and supervised dancing activities and meetings.
- Travel must be continuous between point of origin and point of destination, subject to a minimum of 25 miles one way.
- Vehicle must be commercially licensed for the transport of passengers; vehicle must be operated by a person who holds a valid operators license for such vehicle.

INSPECTION OF PREMISES FOR CONDITIONS OF SAFE USE

Location: _____

Parking Lot Area

Entrance Area & Floor

Dance Floor

Caller's Area on Stage

Kitchen & Dining Room Area

Restrooms

Lighting Facilities

Furniture

Windows & Drapes

We have inspected the square dance facilities provided for our use, both before and after the conclusion of our dance. We find all conditions to be normal and acceptable for safe use, except as noted above.

Signed

Date

Signed

Date

Name of Square Dance Club _____

Complete duplicate copies: One for Club & One for Custodian.

Facilities Checklist: A suggested facilities checklist is enclosed. Before each dance, the facility should be checked and items that are not in proper working order should be noted and brought to the attention of the custodian before taking possession of the facility (dirty, sticky floors; loose tile or floor boards; parking area lighting and condition, etc.) The form should be made in duplicate (original to custodian, and have him sign and date your copy). If this is not done, the club or organization could later be billed for repairs or cleaning; or worse, held liable if condition of facility is inadequate for dancing and an accidental injury is sustained by a dancer as a result of faulty conditions.

UNITED SQUARE DANCERS OF AMERICA

CODE OF CONDUCT

"Square Dancers everywhere are encouraged to comply with an appropriate Code of Conduct which will enhance the public image and the pleasure of the movement to all dancers and non-dancers, as well.

Among the unique aspects of this wholesome activity is the attractive attire which is an intrinsic part of the image of the Square Dance. Accordingly, the wearing of appropriate apparel is as important to the enjoyment of the participants as it is to those watching. Not only should the clothing of the dancers be appealing to the eye, but also functional to the others within the square. This includes the wearing of long-sleeved shirts and ties for the men and full skirts for the ladies.

Avoidance of alcoholic beverages both before and during dances is essential to insure the enjoyment for everyone. A single drink can severely diminish the response time required to execute the intricate moves of the dance. Square Dancing in itself has the capability of providing sufficient exhilaration to warrant abstinence from alcohol on dance nights.

Courtesy to others is important at all times. This includes personal cleanliness, as Square Dancing is an energetic recreation which can be offensive should adequate precautions not be taken.

The welcoming of others into the dance and into the squares is an integral part of the social aspect of Square Dancing. Walking out of a square at any time is considered a severe insult. At the end of the dance, no one should leave the square before thanking everyone who contributed to the joy and the fun of dancing together.

Conforming to the accepted and generally taught hand positions and maneuvers for execution of the movements helps to eliminate any uncertainty among the other dancers. Proper styling while dancing is as important to the enjoyment of the Square Dance as is the proper execution of the movements.

Adherence to these guidelines should be encouraged from the very early stages of beginners class. The best means of achieving this is through example by experienced dancers and leaders and by the incorporation of ethics into the educational process during the class."

It is felt that through the re-affirmation of these long recognized rules of conduct, dancers everywhere will be reminded of the importance of courtesy, friendliness and personal hygiene. All of these things are an integral part of the Square Dance activity.

INSURANCE CLAIM PROCEDURES

Insurance is exactly that, it is there when you need it. The problem I have been experiencing is the lack of instructions to the clubs and individuals that have the misfortune to need to file a claim.

To help resolve this inadequacy, I am formulating the following procedures:

1. At the time of the accident/injury notify the Oregon Federation Insurance Chairman. This will meet the 20 day deadline required by Rhulen Insurance Agency. Report the injured person(s) name, member's club name, name of club and address of dance hall where accident occurred, time of accident and a brief description of the accident.
2. Upon receipt of the Insurance Claim Form, follow the attached instructions explicitly. **RETURN THE CLAIM FORM TO THE INSURANCE CHAIRMAN AFTER ALL NECESSARY ITEMS HAVE BEEN COMPLETED.**
3. Claimants should not leave the claim forms with the doctor or hospital to mail. The claimant should personally mail or deliver the form to the Oregon Federation Insurance Chairman. If a claim is forwarded without bills, it will be held by the insurance company until bills are received. If treatment is to continue over a period of time, bills should be sent in as they are received by the claimant.

When Completed Send Report And Bills To:

Association
Insurance
Chairperson

ACCIDENT CLAIM REPORT
FOR
UNITED SQUARE DANCERS OF AMERICA
P.O. Box 1365
Pine Bluff, Arkansas 71613

AIG LIFE INSURANCE COMPANY

To Be Completed and Returned Within Twenty Days

EXCESS COVERAGE

TO BE COMPLETED BY AFFILIATE INSURANCE CHAIRMAN

NAME OF INSURED CLUB & FEDERATION/ASSOCIATION		CERTIFICATE NUMBER		COMPANY USE ONLY: EFF. DATE _____ TERM. DATE _____	
(1) Last Name of Insured	First Name & Middle Initial	D.O.B.	Sex	Name of Parent/Guardian (If Applicable)	
(2) Date of Accident	Time of Accident a.m. p.m.	Address of Insured (Street, City, State)			
(3) Nature of Injury (Please describe fully indicating what part of body was injured - such as broken arm, sprained ankle, etc.)					
(4) How and where did accident happen? (Please give all possible details)					
Date Accident Reported _____					

Name of Club Officer _____

(5) Did accident occur (check yes or no)

	Yes	No		Yes	No
(a) While claimant was supervised	<input type="checkbox"/>	<input type="checkbox"/>	(d) On activity premises	<input type="checkbox"/>	<input type="checkbox"/>
(b) During sponsored dancing activity	<input type="checkbox"/>	<input type="checkbox"/>	(e) While traveling to or from a regularly scheduled dancing activity as a group in a common carrier	<input type="checkbox"/>	<input type="checkbox"/>
(c) During programmed hours	<input type="checkbox"/>	<input type="checkbox"/>			

Time Activity Commences a.m. p.m.	Time Activity Dismissed a.m. p.m.	Name of Major Activity
--------------------------------------	--------------------------------------	------------------------

(6) I hereby certify that the statements made above are correct to the best of my knowledge and belief, and that the above named claimant was insured hereunder at the time of the accident.

Name of Affiliate _____	Signature of Affiliate Insurance Chairman _____
Address _____	
Date _____	Telephone () _____

TO BE COMPLETED BY CLAIMANT, PARENT, OR GUARDIAN - PART II

Make check payable to: (check boxes as desired) Claimant, Parent or Guardian Hospital
 Doctor (or doctors) Insured Group

Instructions: Your policy includes a provision whereby the extent of medical benefits is dependent upon benefits payable by "other coverage." "Other coverage" is defined as all coverages provided for hospital, surgical or other medical expenses by an insurance, health, or welfare plan, or prepayment arrangement, or by Medicare or any other program, compulsory or voluntary, established by any federal, state or other governmental law or plan. If coverage is provided on a provision of service basis, the amount of benefits under such coverage shall be taken as the amount which the services rendered would have cost in the absence of such coverage.

Claimant's Name (or Father's Name, if a Minor) _____ Social Security Number _____

Name, Address and Phone Number of Claimant's (or Father's) Employer _____

Spouse's Name (or Mother's Name, if a Minor) _____ Social Security Number _____

Name, Address and Phone Number of Spouse's (or Mother's) Employer _____

Other Coverages			
Insurance Company	Address	Policy #	Name and Address of Employer, Union, etc.

Check this box if no applicable "other coverage." Please furnish proof of payment by "other coverage" in the form of payment vouchers, work sheets, or similar documentation.
 I hereby authorize **AMERICAN INTERNATIONAL GROUP** or its representative to release and receive from other insurance companies, employers, unions, trusts, schools or associations, benefit payment information pertaining to

(Print name of Insured person)

Date _____ Signature of Insured Person or parent (if a minor) _____

I hereby certify that the Injury occurred as stated and that all treatments listed above were due entirely to this claim; that the claim was not a result of a congenital, pre-disposing or pre-existing

OREGON INSURANCE FORM (year)

All information must be completed even if it is a duplication.
Be sure all addresses are correct physical addresses. Please
Print Clearly or Type Form!

CLUB NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

COUNCIL MEMBERSHIP: _____

SCHEDULED DANCE HALL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

OWNER OF HALL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

DANCE DATE: _____ TIME: _____

CLASS HALL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

OWNER OF HALL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

CLASS DATE: _____ TIME: _____

CLUB PRESIDENT: _____ PHONE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

NUMBER OF CLUB MEMBERS _____ (DO NOT INCLUDE CLASS MEMBERS)

MULTIPLY BY: \$\$\$.00 ea [to be announced annually]

AMT DUE NOV 1, 1993 _____ (MIN \$\$\$.00 PER CLUB)

PLEASE MAIL THIS FORM, IN DUPLICATE, WITH CHECK TO YOUR STATE

INSURANCE CHAIRMAN:

[Address Label]

[Message]

PLEASE ATTACH:

- 1) CLUB ROSTER (Please note dancers home club) Name, Address, Phone
- 2) CLASS ROSTER
- 3) CHECK (Pay to OREGON FEDERATION OF SQUARE & ROUND DANCE CLUBS)

SIGNED _____

NOTIFICATION OF AN EVENT

This form is to be used for notification of an event, and no Certificate is required. If the facility requires a certificate or to be named as "Additional Named Insured", use the "Request for Certificate of Additional Insured" form.

ASSOCIATION: Oregon Federation of Square and Round Dance Clubs
COUNCIL: _____ COUNCIL DELEGATE: _____
INSURANCE CHAIRMAN: _____
CHAIRMAN'S ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
TELEPHONE NUMBER: _____

TYPE OF FUNCTION - CHECK ONE

EXHIBITION DANCE CLUB DANCE GROUP TRAVEL CLASS

CLUB NAME: _____

CLUB ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DATE OF FUNCTION: _____

FACILITY BEING USED: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

GROUP TRAVEL INFORMATION

DATE OF TRIP: _____ DEPARTURE TIME: _____

DEPARTING FROM (CITY/STATE): _____

DESTINATION (CITY/STATE): _____

NUMBER OF MILES (ONE WAY): _____ (Min 25 miles one way)
(Min 10 Club Members)

CARRIER: _____
(Must be a properly licensed and insured carrier and driver)

COMMENTS: _____

MAIL TO: Association Insurance Chairman

(Name and Address Label)

(Message)