

# Hilton Head Island Carolina Shag Club

## Membership Form

Annual Full Membership **\$30**  
 Membership Year **June 1, 2022 to May 31, 2023**

\_\_\_\_\_ New Member **or** \_\_\_\_\_ Renewing Member      Date: \_\_\_\_\_

**PLEASE PRINT**

Name: \_\_\_\_\_

Address: Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: \_\_\_\_\_ Birth Month \_\_\_\_\_ Day \_\_\_\_\_

Email: \_\_\_\_\_

Community/Plantation: \_\_\_\_\_

**Please include** my name and contact information in the HHICS Club directory  
 (Available only to HHICSC members.)

**Do not include** my name and contact information in the HHICS Club directory.

Member signature: \_\_\_\_\_

**On which Committees would you like to serve?**

- |                       |                   |                          |
|-----------------------|-------------------|--------------------------|
| _____ Winter Classic  | _____ Website     | _____ Social Media       |
| _____ Socials/Parties | _____ Membership  | _____ Welcome            |
| _____ Greeter         | _____ Finance     | _____ Logo'd Merchandise |
| _____ DJ              | _____ Advertising | _____ Historian          |
| _____ Newsletter      | _____ Junior Shag | _____ Dance Instruction  |
| _____ Other _____     |                   |                          |

▪ *Your signature indicates that you agree to abide by the By-Laws and rules and regulations established by the Hilton Head Island Carolina Shag Club.*

▪ *Please make your check payable to **Hilton Head Island Carolina Shag Club**.*

*If mailed, send to HHICSC, P.O. Box 6681, HHI, SC 29938*

Payment by Check	Payment in Cash	For Committee use: To Membership File	For Committee use: To Email Directory	For Committee use: To Treasurer
Amount _____	\$ _____	_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____
Check # _____				