



Beaufort Shag Club

www.beaufortshagclub.com

2025 Membership Application

(Please Print - Note, use the names you'd like to be used on your Name Badge)

Circle One

Name #1 _____ M - F ____/____/____
Last First Circle One Birthday

Name #2 _____ M - F ____/____/____
Last First Circle One Birthday

Address _____
Street Address or PO Box City State Zip

Phone _____ Work _____

Email Addresses _____

Do you want to take our Beginner Lessons Class ? Yes No

(You must contact Woody Oakley at 843-812-1825, or by email - wfoslo75@gmail.com - to be assigned to a class)

I authorize my address, telephone number and email address to be released to the membership ? Yes No

ANNUAL Membership Fee: New Members \$40.00 per person (see pro-rate chart below) / Renewals \$35.00 per person

(**No Refunds** of dues for any reason)

Membership Dues	Membership Dues	Membership Dues	Membership Dues
Jan 1st - March 31st \$40.00 per person	April 1st - June 30th \$30.00 per person	July 1st - Sept 30th \$20.00 per person	Oct 1st - Dec 31st \$10.00 per person

Please note that membership dues are for current year membership with renewals due on January 1st of the following year.

Included in your membership fee: Lessons, weekly and monthly Saturday dances.

Make checks payable to: Beaufort Shag Club

Mailing Address: P. O. Box 54, Port Royal SC. 29935

This information is true to the best of my knowledge. By my signature, I agree to abide by the rules and bylaws of the Beaufort Shag Club. Application into the Beaufort Shag Club shall be extended to persons who are dedicated to the preservation of 'The Shag' and the music associated with it, and those who conduct themselves with appropriate social demeanor. I understand that my membership may be revoked by the Board of Directors at any time deemed necessary due to inappropriate actions or demeanor on my part. I further agree that the Beaufort Shag Club, and its Board of Directors, shall not be held responsible for any accidents, personal injury or loss of any personal property associated with my attendance at, or participation in, any club function.

Member #1 _____ Date ____/____/____

Member #2 _____ Date ____/____/____

How would you like to be involved with the Beaufort Shag Club ?

Helping with Breakfast _____ Social/Decorating _____ Photography _____ DJ'ing _____ As needed _____



Our club dance activities are licensed by:
American Bop Association and we are proud members
Of the Association of Carolina Shag Clubs

