

Shag Club Update Information

Please highlight or put an asterisk beside info which has changed.

Full Member: _____ Subscriber Member: _____

Date submitted: _____ For Year: _____

Reply to each with only one answer. Do not list multiple names, #'s, etc. Turn this in at any A.C.S.C. meeting or mail to the current A.C.S.C. Secretary.

Club Name: _____

Club Address: _____

City, State, Zip: _____

President: _____

Name: _____ Home Phone _____

Vice-President: _____

Name: _____ Home Phone _____

Secretary: _____

Name: _____ Home Phone _____

Treasurer: _____

Name: _____ Home Phone _____

One email contact: _____

Hotline phone number: _____

Web site: _____

Name of Newsletter: _____

Annual Dues: _____ Fiscal Year Begins: _____

Month New Officers Take Office: _____

List day, facility, city, etc. where regular club meetings are held: _____

List day, facility, city, etc. where regular shag nights are held: _____

List any other information about your club you'd like us to know: _____

Is there a radio station in your area that plays shag music? _____

Station Name: _____ AM/FM Channel: _____

City of Origin: _____ Phone Number: _____

Format, or information about special shows, etc. related to beach/shag music: _____

Your Name: _____ Home Phone _____