

# American Dance and Music Week – July 3 to 10, 2004

Name \_\_\_\_\_

Phone (h): (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

Phone (w): (\_\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address \_\_\_\_\_

## Please Check ONE:

- Male
- Female
- Couple. I will attend only if

\_\_\_\_\_ attends.

- Do not print in the camp roster:
- My phone
  - My e-mail
  - My address

## Check all that apply:

- I would like to room with \_\_\_\_\_
- I would like vegetarian meals / require special diet
- I can offer a ride to camp
- Please help me find a ride
- I would like to apply for a work-trade scholarship  
(Work scholarship applicants should send the deposit)

## Enclosed is:

- \_\_\_\_\_ \$665 full tuition
- \_\_\_\_\_ \$ 75 deposit
- \_\_\_\_\_ tax-deductible gift to BACDS

To register, please mail this form with check payable to BACDS:  
BAY AREA COUNTRY DANCE SOCIETY  
c/o Flip Alpern, Registrar, P.O. Box 501, Willits, CA 95490

