CDSS Membership – Join Today!

Communities strengthened by dancing, singing, and making music together.

CDSS is a leading national arts and education service organization supporting traditional dance, music, and song. For over 100 years, we have been spreading joy and building community across North America through these traditions.

Your membership in CDSS supports advice, scholarships, grants, and services for individuals, groups, and communities across the continent, and underwrites a variety of publications and online resources.

CONTACT INFORMATION

Name (s) ______________________________________________________________________________
Address ______________________________________________________________________________
City _____________________________ State ______ Zip ________________________
Phone ___________________________ Email _____________________________________________

Memberships other than individual may include any adults (18+) living in the same household. Your membership gift at any level is fully tax-deductible.

OPTION #1: ANNUAL MEMBERSHIP

☐ Individual ........................................ $50
☐ Family ........................................... $75
☐ Student/Limited Income Individual .................. $25
☐ Student/Limited Income Family ....................... $35
☐ Contributor ...................................... $100
☐ Supporter ........................................ $250
☐ Sustainer ......................................... $500

Dues for annual CDSS membership ......................... $_______
Fund Appeal Contribution ................................. $_______
☐ I wish to donate anonymously

☐ Buy Print Directory @ $10.00 ........................ $_______

TOTAL ENCLOSED (payable in US funds) ............... $_______

OPTION #2: CIRCLE OF FRIENDS MEMBERSHIP

(credit card only)

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<tr>
<th>Monthly Payment</th>
<th>Quarterly Payment</th>
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<td>Individual (min $5)</td>
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PAYMENT INFORMATION

For monthly giving, credit card is required. Your card will be charged the first week of each month/quarter.

Card (Visa/Mastercard) _______ - _______ - _______ - _______ Exp Date: _______ / _______ CCV: _______ Signature: ____________________________________________________________________________

Billing Address (if different from above): ____________________________________________________________________________

☐ Use my credit card # above to renew my annual membership automatically! Signature: ____________________________________________________________________________

The CDSS Member Directory is back! Check the box above to get your copy.

116 Pleasant Street, Suite 345
Easthampton, MA 01027
413-203-5467 • cdss.org