8th Annual

Kentucky Federation of Square Dancing State Convention







Round Dance Cuer Profile

Mailing Address: City: State: Zip: Phone: (Email: I will be available: (check all that apply) Yes No Level of Cueing: Friday Afternoon PH 1 PH 2 Friday Evening PH 3 PH 4 Saturday Morning Saturday Afternoon Saturday Afternoon Saturday Evening Will be available to Workshop: Intro to Rounds PH 3 I will be available to Workshop: Intro to Rounds PH 3 Comments: (include any info that may help in programming)	Name:				Partner Name:		
Phone: () Email:	Mailing Ad	ddress:					
Phone: () Email:	City:				State:	Zip:	
Yes No Level of Cueing: Friday Afternoon PH 1 PH 2 Friday Evening PH 3 PH 4 Saturday Morning Saturday Afternoon Saturday Evening PH 3							
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Saturday Evening							
Number of Years Cueing:							
	will be av	ailable to Wo	rkshop:	Intro to F	Rounds	PH 3	
Comments: (include any info that may help in programming)	Number of	Years Cueing	g:				
	Comments	: (include any	info tha	t may help	in programmi	ng)	

This profile must be returned by Aug, 01, 2016 to:

Helen Olliges 152 Chateaugay Circle Mt Washington, KY40047 502-439-2851 hneolliges@yahoo.com

Thank you in advance for volunteering your time!