



**Louisiana LunaChicks
Membership Application Form**

I am joining as a:

Active Member (Dancer & Community Service)

Helping Hands (Community Service)

Affiliate Member

Name: _____ D.O.B. _____

Cell/Phone Number: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Preferred Social Media:

Facebook Instagram TikTok Other: _____

Current clubs and/or extracurricular activities: _____

How did you hear about the Louisiana LunaChicks?

Facebook Instagram TikTok Saw a performance

Word of Mouth Volunteered with the LunaChicks

Other: _____

Why do you want to be a LunaChick? _____

What's one fact about yourself you'd like to share: _____

By signing this application, I understand that by being a member of the Louisiana LunaChicks I will be participating by dancing and/or community service and volunteerism and that it is required to remain an active member. I also understand that the agreed upon membership fee does not cover all LunaChick expenses and that I may be financially responsible for additional performance wardrobe requirements and activities the group participates in. I understand and agree that photos and/or video footage will be taken and either televised or share on social media for promotional purposes.

Applicant Name (PRINT): _____

Applicant Name (SIGNATURE): _____

Today's Date: _____

*All membership fees are NON REFUNDABLE OR TRANSFERABLE

**Must be 21 years of age or older to participate

***We reserve the right to refuse/revoke membership

Please make all checks payable to:
Louisiana LunaChicks

Other payment methods available:

PayPal
@lalunachicks

Venmo
@Louisiana-LunaChicks

Cash App
\$LouisianaLunaChicks