

**BOWS and BEAUS SQUARE DANCE CLUB**  
**P.O. Box 1107**  
**Mountain View, CA 94042**

**LEAVE OF ABSENCE REQUEST**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Length of Request\*: \_\_\_\_\_ Start Month: \_\_\_\_\_  
(Two to Six Months)

Comments (reason for leave): \_\_\_\_\_

SCVSDA membership/insurance dues payable in advance at \$1.00 per month: \_\_\_\_\_  
(Amount Received / By)

LOA Request Received: \_\_\_\_\_  
(Date and Name)

\*Club Bylaws provide for a minimum Leave of Absence of **two months** and a maximum continuous leave of **six months**. Bylaws state: ***“Members returning from Leave of Absence shall satisfy the Executive Board that they meet the same criteria of dancing ability applied to new members.”***