

USA Dance Membership Application

Please PRINT Clearly

This form may be used by two people at the same address.



Name	Date of Birth	Male <input type="checkbox"/>	Female <input type="checkbox"/>
1.			
2.			

Street Address	Apt. #	City	State	Zip Code

Seasonal Address: Do you have a seasonal address? If so, enter below. Dates applicable: From: _____ To: _____
 Street Address: _____ Apt.# _____ City _____ State _____ Zip Code _____

Home Phone	Work Phone	Cell Phone	Email Address
1.			
2.			

Is this a renewal application? Yes No If Yes, Member # _____, # _____

Name of Chapter I wish to be assigned to: CHAPTER # 3016

Name of College or Youth Club I wish to be assigned to: _____

MEMBERSHIP CATEGORY	FEE	TAX	ADDITIONAL INFORMATION												
Recreational: Social Ballroom Dancer	\$ 35	\$	Dances for enjoyment and works to improve but does not compete. May include retired DS Athlete.												
Recreational: Social Adult Dancer	\$ 25	\$	Enjoys and appreciates the physical, mental, and social benefits of social dancing.												
Recreational: Social Youth Dancer	\$ 10	\$	A social dancer under the age of 19. Often a family member or friend of adult member.												
Recreational: Social Dance Teacher	\$ 50	\$	An individual who is engaged in the teaching of social dance.												
<i>Note: Social Youth members do not receive the American Dancer magazine.</i>															
DanceSport: Adult Athlete	\$ 60	\$	A competitive dancer who is age 19 or above.												
DanceSport: Student Athlete	\$ 20	\$	A competitive dancer who is age of 19 or above but below age 35 and is enrolled in school full time.												
DanceSport: Minor Athlete	\$ 15	\$	A competitive dancer who is below the age of 19.												
DanceSport: Professional Athlete	\$ 65	\$	A competitive dancer who declares him or herself as a professional, or dances in a professional event or is registered as a Professional Member with a member organization of the WDC or IPDSC.												
DanceSport Professional	\$ 70	\$	An <u>individual</u> who serves in an official capacity in the field of DanceSport and/or ballroom dance.												
DanceSport: Special Olympics Athlete	\$ 10	\$	Qualifies for participating in Special Olympics competitions only.												
DanceSport: Unified Sports @ Partner	\$ 25	\$	Dance Partner of Special Olympics Athlete -for participating in Special Olympics only.												
Dance Industry: Retail Organization	\$ 100	\$	An <u>organization</u> who offers products and/or services to dancers. Retail organizations may be listed on USA Dance web site and in American Dancer magazine. Print the name of your company in the space below.												
Other Misc. Fees	\$	\$	This space for upgrades, and other miscellaneous fees.												
Total Membership Fees	\$	\$	<table style="width: 100%; border: none;"> <tr> <td>TV Programs</td><td>\$</td> <td>Public Library</td><td>\$</td> <td>Amateur Travel</td><td>\$</td> </tr> <tr> <td>Youth Program</td><td>\$</td> <td>College Program</td><td>\$</td> <td>General Fund</td><td>\$</td> </tr> </table>	TV Programs	\$	Public Library	\$	Amateur Travel	\$	Youth Program	\$	College Program	\$	General Fund	\$
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Total Contributions & Donations	\$	\$	<table style="width: 100%; border: none;"> <tr> <td>Hazelwood Fund</td><td>\$</td> <td>Your Chapter</td><td>\$</td> <td>Other</td><td>\$</td> </tr> <tr> <td>Youth Program</td><td>\$</td> <td>College Program</td><td>\$</td> <td>General Fund</td><td>\$</td> </tr> </table>	Hazelwood Fund	\$	Your Chapter	\$	Other	\$	Youth Program	\$	College Program	\$	General Fund	\$
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TOTAL AMOUNT DUE		\$	<table style="width: 100%; border: none;"> <tr> <td>Scholarships for National Championships</td><td>\$</td> </tr> <tr> <td>Other Memorial Funds: (write name)</td><td>\$</td> </tr> </table>	Scholarships for National Championships	\$	Other Memorial Funds: (write name)	\$								
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You may enroll on-line at www.usadance.org
 Or, you may mail your application and payment. Make check payable to USA Dance and send to:
 USA Dance Membership Director - PO Box 126 - Southampton PA 18966-0126
 Central Office 1-800-447-9047

* Public Library: Donate American Dancers Magazine to your Public Library, only \$9 for one year. Library Name: _____

Library Address: _____

** Amateur Travel: Travel of our representatives to participate in the World Championships.
 We are a volunteer organization. Can we count on you? Yes If yes, where? Chapter Regional National

What is your area of expertise? _____ How are you willing to help USA Dance? _____