

Dance Teachers' Club of Boston with The American Society Membership Application

PERSONAL INFORMATION

LAST NAME:

FIRST NAME:

FORMER NAME: (If applicable)

DATE OF BIRTH: (must be 18+)

EMAIL ADDRESS:

HOME/CELL PHONE NUMBER:

STUDIO PHONE NUMBER:

STREET ADDRESS:

CITY, STATE:

ZIP CODE:

EDUCATION / TEACHING EXPERIENCE

List you current and past
teaching experience:

List the Teachers with whom you
have studied with and the Dates
you Studied with them:

I attest to the fact that the above information is accurate, and I agree to uphold the Code of Ethics, rules and by-laws of the Dance Teachers' Club of Boston, Inc. and the American Society.

Membership Type	Active Membership	Social Membership	
I chose to be examined in:	Ballet	Tap	Jazz
	Acro	Ballroom	

Vouched for by the following two DTCB/AS members in good standing:

Print/Type Name: Relationship to Applicant

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Your check for the current assessed dues as well as application fee must be submitted to the Membership Examiner or the Treasurer before the application can continue to be processed. Please note that you must be examined within the same season that your name is posted in the DTCB newsletter, and accepted by the grand body (membership). There will be no refunds of money for the failure to be tested within the period of time, or for failure to pass at least one exam.

Please upload this application and fill out the online membership at:
www.dtcn.wildapricot.org/join-us