

***PERFORMING ARTS APPLICATION FOR ACTIVE MEMBERSHIP***

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

Address (incl. zip) \_\_\_\_\_

Telephone Numbers: *home* \_\_\_\_\_ *cell* \_\_\_\_\_ *studio* \_\_\_\_\_

E-mail Address \_\_\_\_\_

Date of Birth (must be over the age of 18): \_\_\_\_\_

Teachers With Whom You Have Studied (approximate dates) \_\_\_\_\_

\_\_\_\_\_

Number of Teaching Years: *NOTE: You must have been actively teaching for at least three years* \_\_\_\_\_

Current Instruction Experience: Where (list all) \_\_\_\_\_

\_\_\_\_\_

Dance Subject(s) \_\_\_\_\_

*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.*

*I choose to be examined in (circle as many as apply):*    Ballet    Tap    Jazz    Acrobatic

Applicant Signature: \_\_\_\_\_

Vouched for by the following two members in good standing of the Dance Teachers' Club of Boston, Inc. and the American Society: (signature) \_\_\_\_\_ (relationship to applicant)

(signature) \_\_\_\_\_ (relationship to applicant)

**Your check of \$130** must accompany this application. Please note that you must be examined within the same season that your name is posted in the DTCB newsletter, and accepted by grand body (membership). There will be no refunds of money for failure to be tested within this period of time, or for failure to pass at least one exam.

**Please return to Secretary:** Peggy Whyte Kearsley  
24 Stuart St., Watertown, Ma. 02472