

Application for Membership

Mr / Mrs / Ms / Miss

First Name: _____ Surname: _____

Name (as you wish to appear on your Membership Certificate):

Address _____

Postcode _____ Telephone No. _____ Mobile No. _____

Email Address _____

Date of Birth (if under 18) _____ Occupation _____

Working With Children Check No _____

* COMDANCE qualifications

* Details of other qualifications held

Do you own a studio? Y / N

Name & Address: _____

*** In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.**

Signature of applicant _____ Date _____

* **Nominations**

I, _____ a financial member of the Association, nominate the applicant, who is personally known to me, for membership of this Association.

Signature of Proposer _____ Date: _____

I, _____ a financial member of the Association, second the nomination of the applicant, who is personally known to me, for membership of this Association.

Signature of Seconder _____ Date: _____

