



GLOBAL COMMUNITY OF DANCE

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: _____



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Guidelines for Membership Applications

- 1) Applicants must be nominated for and seconded for membership by current financial members of the Society.
(Applicants must be 17 years of age or over for admission to membership.)
- 2) Full Membership is open to Teachers' Diploma holders of the Society who are entitled to use the designatory letters appropriate to their qualification.
- 3) Affiliate membership is available to teachers of dancing, professional dancers, and student dancers who do not hold the Society's Teaching Diploma.
- 4) Both Full Members and Affiliates have full voting rights within the Society and equal rights to attendance at meetings of the Society.
- 5) Please complete all details requested on the application form, sign and date, and have your Proposer and Secunder complete, sign, and date their section.
- 6) The completed application should then be sent to us with an amount of \$143.00 (includes GST) being the current subscription fee.
- 7) Applications are considered at Executive Committee meetings or by the Membership Sub-Committee of the Executive.
- 8) If your professional name is different from the name shown on the application form and you wish to have mail sent to you under that name, please show that detail below:
- 9) Email completed form, photocopies/scans of qualifications listed, and payment to admin@comdance.org

Credit Card Payments (incurs a 2% fee i.e., \$143 + \$2.64)

Visa/MasterCard:

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Expiry Date: — — / — —

Signature: _____