



APPLICATION FOR MEMBERSHIP

Membership shall be open to all people over the age of 18 years who have a responsible teaching position. Eligible for membership are people who have a teaching qualification from a well-recognized organisation or tertiary institution or are independent or freelance professionals teaching and/or choreographing in any dance form and who are of recognised standing in the dance community. Application must be submitted to the Executive Committee who may in their entire discretion, either accept or reject the application.

Full Names:			
Address:			
Cell number:		E-mail:	
Name of Dance Studio: (or studio you currently teach at)			

Member of any other dance association?	Yes		No	
If so, please list:				
Are you more than 18 years of age?	Yes		No	
Dance form / type of coaching:				




admin@wpda.org.za


082 770 4877
Daphne - Chairperson


www.wpda.org.za


079 241 1716
Lizelle - Secretary



Areas you're currently teaching in:	
Qualifications	
Please provide additional information of what you are able to offer and if you wish to be listed in the dance directory: Examples: Venue hire, costume hire, locum teaching, adjudicating or examining, choreography, technical advice, stage managing, guest teaching, workshops, music editing, dance mat hire, videography, photography, etc.	

I _____ (full name), wish to apply for membership of the Western Province Dance Association.

AGREEMENT:

I agree to adhere to the rules of the Association. I will pay all arrears that may be due by me. Professional conduct: The WPDA Constitution is binding on all its members. Members who breach this code may be suspended.



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Upon acceptance of this application you will be entitled to participate in; Western Province Dance Association Webinars, Showcase, Calendar of Events, and be listed in our Dance Directory.

WPDA BANKING DETAILS:

WPDTA
Nedbank
Branch Code: 198765
Account no.1010036211
Reference: Your full name

Signature of applicant: _____ Date: _____

Proposed by: _____ Date: _____

Seconded by: _____ Date: _____

