



DanceSport Alberta

Breaking Associate Membership Form

The DSAB membership year runs from January 1st – December 31st.
Application date determines the membership rate and membership year.

- Breaker competitive \$35.00 [Includes the CDS CRAD (Canadian Registry of Amateur Dancers) fee]
 Breaker non-competitive \$35.00

Membership applications and fees collected by a third party are not valid until received by the DSAB Membership Coordinator.

First Name: _____ Surname: _____
Date of Birth (MM/DD/YYYY): _____ Gender: Male Female
Address: _____ City: _____ Prov.: _____ Postal Code: _____
Phone: _____ E-mail: _____

Proof of age and citizenship must be submitted one time only. Copies of documents are acceptable.

This membership permits a member to compete at sanctioned regional, national and international events.

In addition, per Breaking Canada; "All registered members are permitted to compete in sanctioned CDS Breaking competitions across Canada and sanctioned WDSF member body events internationally. Registered members of DanceSport are provided with official athlete recognition and statistical recording for Canadian recoding for Canadian ranking purposes. All registered members of DanceSport will be provided with membership rates for all Sport Canada, CDS, and Breaking Canada supported events, workshops, and programming. Members are also permitted to compete and record statistics from other WDSF Breaking events organized in other countries. All members that choose to compete at WDSF organized events must also obtain a WDSF athlete ID card."

Declarations:

I declare that as a member of DanceSport Alberta, I agree to abide by the bylaws, rules and regulations of DanceSport Alberta (DSAB), Canada DanceSport (CDS) and the World DanceSport Federation (WDSF). I understand that DSAB reserves the right to use or publish competition photographs or videos of members for promotional purposes. I understand that my personal information is collected in compliance with section 33 of the Alberta Freedom of Information and Protection of Privacy (FOIP) Act. I understand that my membership application and fee may be collected by a third party, with the understanding that my membership is not valid until said membership and fee has been received by the Membership Coordinator.

Waiver and Liability:

I release and forever discharge DanceSport Alberta (DSAB), Canada DanceSport (CDS) and the World DanceSport Federation (WDSF) including their representatives, officers and directors from any liability, claims, damages, acts or omissions as a result of my participation in any breaking competition or event sanctioned by DSAB.

If applicant is under 18: The Undersigned hereby warrant and represent to DSAB that I am a legal parent or guardian of the person on whose behalf I grant this release

Signature: _____ Date: _____
(Parent or guardian, if applicant is under 18.)

Parent or Guardian Name (print legibly): _____

PAYMENT / CONTACT INFORMATION

Please e-transfer your payment to membership@dancesportalberta.org . For other forms of payment, contact membership coordinator at the same e-mail address.

This form and any applicable documents, such as proof of citizenship and age, should be emailed to the above address.