

DanceSport Alberta Membership Form

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

Please s	select the m	eml	bership you	are	applying fo	r:										
☐ Pre-0 ☐ Syllal ☐ Syllal ☐ Syllal	Champ & Cl bus 16 & ov bus 9 – 15 bus 8 & und Competitor	ham /er ((Nev der (pionship 16 pionship 15 Newcomer wcomer – G Newcomer	i & ι – G Gold) – G	inder * \$45 old) * \$60 * \$30 old) * \$20 \$35	0.00 5.00 0.00 0.00 0.00 5.00))))									
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First Name:							Surname:									
Date of Birth (MM/DD/YYYY):							Gender:			□ Male □		☐ Female				
Address:							City:			Prov.:			Postal C	Postal Code:		
Phone:	E-mail:															
Please selection Standard	ct your rated Not Applicable		npetitive level Newcomer	T ,	ne per discipl Pre-Bronze		Bronze		Silver		Gold		Pre-Champ**		Championship**	
Latin	☐ Not Applicable		Newcomer		Pre-Bronze		Bronze		Silver		Gold		Pre-Champ**		Championship**	
	•		•			•				•					gnized rated level. Iments acceptable.	
<u>Declarations</u>	<u>s:</u>															
DanceSport <i>i</i> he right to us	Alberta (DSA e or publish on compliance	(B)), com	Canada Dan petition photo	iceS igrap	port (CDS) a hs or videos	nd t of m	he World nembers fo	Dan or pr	ceSport omotior	Fec al p	leration urposes	(WD . I ur	SF). I understa	and th my pe	and regulations of hat DSAB reserves ersonal information	
ncluding thei	r representa	tives	s, officers and	d dire	ectors from a	ny li	ability, cla	aims	, damag	jes,	acts or	omis		ılt of	Federation (WDSF) my participation in s or events.	
f applicant is behalf I grant			Indersigned h	ereb	y warrant an	d re	present to	DS	AB that	l am	ı a legal	pare	nt or guardian	of the	e person on whose	
ignature:(Parent or guardian, if applicant is under 18.)											[Date:	i			
	(P	aren	t or guardian	, if a	pplicant is ur	nder	18.)									
Parent or Gu	ardian Name	e (pr	int 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.