



DanceSport Alberta Membership Form

The DSAB membership year runs from January 1st – December 31st.

Age categories are determined by the age the athlete turns during the calendar year of membership.

Please select the membership you are applying for:

- | | |
|---|---------|
| <input type="checkbox"/> Pre-Champ & Championship 16 & over * | \$70.00 |
| <input type="checkbox"/> Pre-Champ & Championship 15 & under * | \$45.00 |
| <input type="checkbox"/> Syllabus 16 & over (Newcomer – Gold) * | \$60.00 |
| <input type="checkbox"/> Syllabus 9 – 15 (Newcomer – Gold) * | \$30.00 |
| <input type="checkbox"/> Syllabus 8 & under (Newcomer – Gold) * | \$20.00 |
| <input type="checkbox"/> Non-Competitor | \$35.00 |

* Note: Competitor memberships include the CDS CRAD (Canadian Registry of Amateur Dancers) fee.

First Name: _____

Surname: _____

Date of Birth (MM/DD/YYYY): _____

Gender: Male Female

Address: _____

City: _____ Prov.: _____ Postal Code: _____

Phone: _____

E-mail: _____

Please select your rated competitive level* (one per discipline):

Standard	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Newcomer	<input type="checkbox"/> Pre-Bronze	<input type="checkbox"/> Bronze	<input type="checkbox"/> Silver	<input type="checkbox"/> Gold	<input type="checkbox"/> Pre-Champ**	<input type="checkbox"/> Championship**
Latin	<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Newcomer	<input type="checkbox"/> Pre-Bronze	<input type="checkbox"/> Bronze	<input type="checkbox"/> Silver	<input type="checkbox"/> Gold	<input type="checkbox"/> Pre-Champ**	<input type="checkbox"/> Championship**

* A dancer may dance one level higher than his / her recognized rated level, but may not dance below his / her recognized rated level.

** Pre-Champ and Championship only: Proof of citizenship and age must be submitted one time only. Copies of documents acceptable.

Declarations:

I declare that I am an amateur dancer, and 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.

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 competition or event organized by DSAB and agree to abide by all rules and regulations governing said competitions or events.

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

Date: _____

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.