

Membership & Examination Application

Please complete in Block Capitals

Mr/Mrs/Miss _____

Address _____

_____ Postcode _____

Telephone _____ Mobile _____

Email _____

To the Executive Council, I hereby apply to be accepted/examined as a (Please insert Provisional, Associate, Licentiate or Fellow)
_____ in _____ (Style/Branch eg. Ballet)

Age _____ (under 21's only).

Who coached you for this Examination? _____

Is dancing your sole occupation? _____ Other occupation _____

Qualifications held with the UKA / Other Associations _____

Please give details of academic qualifications (new entrant only need reply)

Please provide the names and address of two persons, to whom we may refer regarding your social and professional status. One of whom must be a member of a recognised Association. (New entrant only need reply)

1. _____

2. _____

If my application/examination is successful, I agree to abide by the Code of Conduct of the Alliance

Signed _____ Date _____

**IN SIGNING I CONFIRM THAT I DO NOT HAVE ANY CONVICTIONS OR CAUTIONS,
EITHER ENFORCED OR PENDING, WHICH WOULD PRECLUDE ME FROM ACTIVITIES WITH
YOUNG PERSONS AND VULNERABLE ADULTS**

**This form can also be used for qualified teachers to apply for Membership
Proof of qualification (Certificate or Membership card copy) to be enclosed**

This form and payment must be received at Centenary House at least 10 days before your exam date

An Awarding Body Validated by The Council for Dance Education & Training
CORPORATE MEMBERS OF

British Dance Council : Sports and Recreation Alliance : Scottish Official Board of Highland Dancing
United Kingdom Alliance Ltd. Reg No. 1124834