

# USA Dance Membership Application

## Social Dance Division

Please PRINT Clearly



RECOGNIZED  
SPORT  
ORGANIZATION

<b>Name</b>		<b>Date of Birth</b>	<b>Gender</b>		
			Male [ ] Female [ ] Other _____		
<b>Race/Ethnicity</b>					
Native American or Alaskan Native ____ Asian ____ Black or African American ____ Hispanic or LatinX ____ Middle Eastern or North African ____ Native Hawaiian or Pacific Islander ____ White (non-Hispanic) ____					
<b>Street Address</b>		<b>Apt #</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Home Phone</b>	<b>Cell Phone</b>		<b>Email Address</b>		
Is this a renewal application? ____ Yes ____ No If Yes, Member # _____					
Name of USA Dance Chapter I wish to be affiliated with: _____					
<i>If no chapter is chosen, USA Dance will assign you to the closest chapter to your address</i>					

### MEMBERSHIP CATEGORY ADDITIONAL INFORMATION

<b>Social Dance Advocate</b>	\$45	\$	<i>A social dancer, age 18 or above, who enjoys and appreciates the physical, mental and social benefits of dancing. \$10.00 is contributed to the Archie Hazelwood Memorial Fund which promotes the advancement of the USA Dance Chapters.</i>
<b>Social Adult Dancer</b>	\$35	\$	<i>A social dancer, 18 or above, who enjoys and appreciates the physical, mental and social benefits of dancing.</i>
<b>Social Youth Dancer</b>	\$10	\$	<i>A social dancer under the age of 18.</i>
<b>Social Dance Teacher</b>	\$60	\$	<i>An individual who is engaged in the teaching of social dance.</i>

**Total Amount Due:** \_\_\_\_\_

Please check here if you want to be on Auto-Renewal. Must maintain a valid credit card on file.

You may enroll online at: [www.usadance.org](http://www.usadance.org)

Or, you may mail your application and payment. Make check payable to **USA Dance, Inc** and

send to: **USA Dance, 2870 Kerrisdale Ridge Dr, Medford, OR 97504**

Central Office: 800-760-0582

**\*Memberships for Social Dance Members are on a 12 month basis on the anniversary date of membership.**