



# English Amateur Dancesport Association

## Application for Student Membership 1<sup>st</sup> October 2011 to 30<sup>th</sup> September 2012

Full time students at any British University are eligible for student membership of EADA. The completed form should be returned before your first open circuit competition, with a cheque for £17.00 payable to EADA Ltd., a photocopy of your student card and a small stamped self-addressed envelope to: **EADA, 93 Collins Road, Exeter, EX4 5DE**

Please note that you must have received your EADA card before you are registered to compete. Your details will be held on EADA's database and will be passed on to the British Dance Council for registration purposes. If you would prefer that your details are not passed onto other related dance organisations please tick here  Please note that if you wish to compete in WDSF competitions you will need to become a member of Dancesport England: [www.dancesportengland.org.uk](http://www.dancesportengland.org.uk).

*I wish to renew my membership with EADA*  *Last known number* \_\_\_\_\_  
*or I wish to apply to enrol with EADA as a new member*

*University* \_\_\_\_\_ *NUS/University card number* \_\_\_\_\_

**BLOCK CAPITALS PLEASE.** *Fields marked with a \* are mandatory.*

*Surname\** \_\_\_\_\_ *Forename\** \_\_\_\_\_ *Mr. Mrs. Ms. Miss Dr*  
*Known as* \_\_\_\_\_ *Other Names* \_\_\_\_\_  
*Address1\** \_\_\_\_\_  
*Address2* \_\_\_\_\_ *Date of Birth\** \_\_\_\_\_  
*Town/City\** \_\_\_\_\_ *Phone: Daytime* \_\_\_\_\_  
*Post Code\** \_\_\_\_\_ *Evening* \_\_\_\_\_  
*E-mail\** \_\_\_\_\_ *Mobile* \_\_\_\_\_

*Nationality\** \_\_\_\_\_ *Do you hold a current British Passport?\**  *Yes*  *No*  
*Country you elect to represent\** \_\_\_\_\_ *Please note to represent England at least one half of the couple must hold a current British passport.*

*Partner* \_\_\_\_\_ *Partners Reg. No. if known* \_\_\_\_\_

I have enclosed a cheque / PO payable to EADA Ltd. for £17.00

I have enclosed a photocopy of my student card and an SAE

I would prefer to receive InMotion (EADA's magazine) by e-mail

Applicant sign below:

*Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

**Please indicate below your ELIGIBLE STYLE(S) DANCED and GRADE:**

|                 |          |                          |         |                          |              |                          |           |                          |              |                          |
|-----------------|----------|--------------------------|---------|--------------------------|--------------|--------------------------|-----------|--------------------------|--------------|--------------------------|
| <i>Standard</i> | Beginner | <input type="checkbox"/> | Novice  | <input type="checkbox"/> | Intermediate | <input type="checkbox"/> | Pre-champ | <input type="checkbox"/> | Championship | <input type="checkbox"/> |
| <i>Latin</i>    | Beginner | <input type="checkbox"/> | Novice  | <input type="checkbox"/> | Intermediate | <input type="checkbox"/> | Pre-champ | <input type="checkbox"/> | Championship | <input type="checkbox"/> |
| <i>Sequence</i> | Beginner | <input type="checkbox"/> | Starter | <input type="checkbox"/> | Intermediate | <input type="checkbox"/> |           |                          | Championship | <input type="checkbox"/> |

|                |            |                    |                |
|----------------|------------|--------------------|----------------|
| Date Received: | Date Sent: | Membership Number: | Partners. No.: |
|----------------|------------|--------------------|----------------|