



APPLICATION FOR PROVISIONAL MEMBERSHIP

REQUIREMENTS FOR PROVISIONAL MEMBERSHIP

Minimum of 16 years of age at time of applying for provisional membership
 Must hold either Intermediate Foundation or above with the UTD or a CDMT recognised awarding body

When returning your application form to Head Office please also include the following

- Copies of all qualifications detailed below on this application form
- Two references from individuals that know you on a professional basis
- Copy of a valid DBS Certificate and a valid First Aid Certificate

If you have any queries or need any information re obtaining a valid DBS / First Aid Certificate then please contact the office.

FULL NAME	
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ADDRESS	
	POSTCODE

DATE OF BIRTH		TELEPHONE NO	
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EMAIL ADDRESS	
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ALTERNATIVE CONTACT NO	
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<p style="text-align: center;">WHERE DO YOU INTEND TO TEACH THE UTD PROGRAMMES OF STUDY? Please name the school and Principal of the school where you intend on teaching the UTD Programmes of Study</p>

SUBJECT QUALIFICATIONS			
SUBJECT	HIGHEST LEVEL ACHIEVED	AWARDING BODY	DATE OF EXAMINATION
BALLET			
MODERN			
TAP			
ACROBATICS			
LYRICAL			
MUSICAL THEATRE			
STREET DANCE			
FREESTYLE			



ADDITIONAL QUALIFICATIONS

Please list any additional qualifications that you feel may be appropriate for the UTD to have knowledge of

Consent and Declarations:

I agree to have my personal details kept on file only for the purpose of membership with the United Teachers of Dance LTD and understand that my data will always be kept secure. I agree to be contacted by post, email, telephone and any social media accounts related to the Association that I have freely joined in the event of an emergency, to receive updates, reminders, invoices and newsletters as necessary in accordance with the United Teachers of Dance Data Protection & Privacy Policy.

Yes, consent is given No consent is not given

I agree and understand that acceptance of Provisional Membership is granted based on the information provided on this form. Provisional Membership is only to be advertised once and if annual subscription fees have been paid to the United Teachers of Dance.

If at any time the information given freely on this form proves to be incorrect the United Teachers of Dance reserves the right to, either, withhold provisional membership or in cases where it has already been awarded, revoke it.

I agree and confirm below that to the best of my knowledge the information given on this form is true and correct.

Full Name: _____

Signature: _____

Date: _____