



Queensland Associated Dance Studios Inc.

Membership Application

Name _____

Address _____

Email _____

Phone Number _____

I agree to have my details listed on the QADS website Yes / No

Membership level - ☐ Ordinary Member (unqualified member)

- ☐ Qualified Member (details listed below)

DSA Accreditation Level				Qualifications- Level 1,2,3			
	Standard	Latin	New Vogue	Standard	Latin	New Vogue	Society
Coach							
Adjudicator							

I agree to abide by the constitution and rules of the society and declare that I am over 16 years of age.

Signature of applicant : _____ Date: _____

Membership Fee \$40 - QADS Inc. , BSB: 484799 , Account No. 507446861

This application to be sent to the Executive Officer, QADS Inc. for consideration at the next Committee meeting.

Please email to – The Executive Officer at - oxleydance@gmail.com

For office use only

Accepted MCM		Welcome Letter	
\$ sent to treasurer		QADS Directory	