



2016 PROFESSIONAL REGISTRATION FORM

NAME: _____

ADDRESS: _____

POSTAL CODE _____

TEL/CELL NUMBER: _____ FAX NUMBER: _____

EMAIL ADDRESS: _____

I AM A MEMBER OF: _____ Date of Membership: _____

I AM AFFILIATED TO: _____ Date of Affiliation: _____

I AM A QUALIFIED SCRUTINEER: YES/NO Date of Examination: _____

I AM A COMPETING PROFESSIONAL: YES/NO Name of Partner: _____

[Partnerships are to complete one form per person]

Qualification:

Please specify the Association where the Qualification was originally obtained e.g. SADF, SADTA, IDTA, Fred Astaire, etc.

	Ballroom	Association	Latin	Association.	Freestyle	Association
Example	Yes	Fred Astaire	Yes	SADF	No	N/A
S/Teacher						
Associate						
Licentiate						
Fellow						

Breakdown	Fee Structure
R 295	Professional Registration
R 295	Scrutineer
R 295	Chairperson
R 400	Adjudicator
R 540	WDC Competitor
R 605	WDC Adjudicator

Name of Account	South African Dance Foundation
Bank	Nedbank
Branch	Braamfontein
Branch Code	19500502
Account No	1001183142
Email Payment	sadfheadoffice@gmail.com
Fax Payment	011 339 7282

Registration Period : 1st January 2016 – 31st December 2016

Fees are paid annually effective the 1st January every year – you will be invoiced by the SADF Head Office.

New members to query the process with the SADF Administrator.

SIGNATURE: _____ DATE: _____

I agree to abide by the Rules of the South African Dance Foundation.

SOUTH AFRICAN DANCE FOUNDATION

Reg No: 1998/019003/08

Section 21 Company, Not For Gain

49 Jorrisen Street, 14th Floor Orion House, Braamfontein - P.O. Box 30825, Braamfontein, South Africa

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