

**PROFESSIONAL APPLICATION FORM
(BOTH SECTIONS MUST BE COMPLETED IN FULL)****SECTION 1 THIS SECTION MUST ONLY CONTAIN THE CANDIDATES DETAILS**

Candidates Name in Full: (Mr,Mrs,Miss).....

Candidates Postal Address: (Examinations will not take place if candidates own personal address is not on application form)

.....

.....

Post Code:Country:

Tel No:E-mail:

If you are already an IDTA member please insert your Membership No:.....
Or, if you are a new member of the Association, we will issue you with a membership number via email, please wait for your membership number before making payment.

Date of Examination: Date of Birth:

Venue of Examination:

What Best Describes your gender? Female Male Prefer not to say Prefer to self-describe:.....How did you hear about the IDTA membership? Social Media IDTA Website Google Through my dance school/teacher Printed flyer about the IDTA if other, please specify:

What made you decide to become a member of the IDTA?

 Free entrance to events Access to dance related resources Connect with the local dance community
 Connect with the global dance community To receive the quarterly magazine
 If other, please specify:**IF THIS IS YOUR FIRST IDTA PROFESSIONAL EXAMINATION, PLEASE ATTACH TO THIS FORM THE NAMES AND ADDRESSES OF TWO REFEREES TO SUPPORT YOUR APPLICATION TO JOIN THE ASSOCIATION.**

Previous qualifications:

DECLARATION: I apply to be examined for: Associate Licentiate Fellowship Diploma

Genre:

Module:

(Example: Ballroom, Latin, Ballet, Tap etc.)

(Example for Ballroom, Latin and Sequence: Waltz, Rumba, Foxtrot etc.)

(Example for Diploma: Argentine Tango, Salsa,

(Example for Theatre and Freestyle: 1, 2, 3, 4)

Acrobatic Dance, Musical Theatre)

DO YOU WISH THIS EXAMINATION TO BE PUBLISHED IN THE IDTA DANCE INTERNATIONAL MAGAZINE: Yes / No**SECTION 2 TEACHER INFORMATION**

Teacher Membership Number: Teacher E-mail address:.....

Teacher Name in Full:

Do you wish a copy of the report form to be sent to your teacher: Yes..... No.....

Date:Signature:

The information will only be used in accordance with the General Data Protection Act. Please see www.idta.co.uk/privacy-notice for details.

(Professional Application FormsNewProApp.doc

Terms and Conditions:

Please read the conditions and information set out in the appropriate Ballroom and Theatre syllabi. Please note Fellowship candidates must hold the Licentiate qualification in the branch applied for, for one year.

Contact Head Office for our fees structure.

Once the examinations date has been set, professional examination fees are non-refundable when cancelled within two weeks of the examination date, unless a doctor's certificate is provided.

Once the examinations date has been set, a cancellation fee will be charged at 50% of the current examinations fee, if the examination is cancelled four weeks prior to the examination date, unless a doctor's certificate is provided.

A special examination fee of £134.00 will be incurred if the examination is conducted independently of any other professional or amateur examinations.

New members to the Association are appointed by the Board of Directors to which body the results of the technical examination are reported.

For new Members a membership fee and one off administration fee will be required before an examination report and professional certificate can be issued.

PREGNANCY

Candidates who are pregnant at the time of the examination are recommended to use a demonstrator and undertake the examination at their own risk.

Updated May 2025