



Line Dance Association of Australia Inc.  
ABN: 72 762 230 096  
PO Box 60, KERRIMUIR VIC 3129  
Phone: 0410 353 132  
Website: www.linedanceaustralia.com.au  
Email: info@linedanceaustralia.com.au

## Line Dance Association of Australia

# MEMBERSHIP APPLICATION & RENEWAL FORM

*Please fill in your details below:*

Membership Number: \_\_\_\_\_ (if renewing membership)

Title (Select one)     Mr  Mrs  Ms  Miss  Master  Other

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Invoice to: \_\_\_\_\_ (as above if same as person)

Postal Address: \_\_\_\_\_

Date of Birth: \_\_\_ / \_\_\_ / \_\_\_\_\_      SIGNATURE: \_\_\_\_\_

Dance Club / Group Name: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_      Fax: (    ) \_\_\_\_\_      Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_  
(please see note at bottom of page 2)

Website Address: \_\_\_\_\_

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My interest in Line Dancing is mainly in the following categories: (tick any or all that apply to your interest)

Instructor     Choreographer     Social Dancer     Coach     Competitor

I authorise LDAA to provide my details to third parties offering discounts to members     Yes     No



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### MEMBERSHIP & RENEWAL FORM

Initial Joining Fee: \$10:00

I wish to apply for LDAA Membership /Renewal (please circle choice)

- Associate Membership: \$15:00  
 Professional Membership: \$25:00

I have classes/socials that I wish to advertise on the web. Yes No

I have included this list

or

I will email this listing to [ldaa@linedanceaustralia.com.au](mailto:ldaa@linedanceaustralia.com.au)

TOTAL AMOUNT ENCLOSED: \$ \_\_\_\_\_

**PLEASE NOTE THAT THE LDAA MEMBERSHIP YEAR  
RUNS FROM JANUARY 1<sup>ST</sup> - DECEMBER 31<sup>ST</sup>**

**\*\*\*ALL RENEWAL FEES ARE DUE BY JANUARY 1<sup>ST</sup>\*\*\***

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**\*\*E-MAIL\*\* Please Note:** For efficient and prompt service to our members, e-mail is the preferred method of communication. Please include a direct email address, or an email address you have access to, to enable us to communicate with you efficiently.



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## Line Dance Association of Australia

### MEMBERSHIP & RENEWAL FORM

#### PROFESSIONAL MEMBER CLASS LISTINGS

DAY: \_\_\_\_\_

TIME: \_\_\_\_\_

VENUE & ADDRESS: \_\_\_\_\_

CLASS LEVEL: \_\_\_\_\_

DAY: \_\_\_\_\_

TIME: \_\_\_\_\_

VENUE & ADDRESS: \_\_\_\_\_

CLASS LEVEL: \_\_\_\_\_

DAY: \_\_\_\_\_

TIME: \_\_\_\_\_

VENUE & ADDRESS: \_\_\_\_\_

CLASS LEVEL: \_\_\_\_\_

\*\*\*PLEASE COPY PAGE IF MORE ROOM IS REQUIRED FOR YOUR CLASSES\*\*\*