

# MARYLAND COUNCIL FOR DANCE MEMBERSHIP APPLICATION

Dues are due July 1, 2009 for membership year July 1, 2009 through June 30, 2010.

**MEMBER BENEFITS:** Newsletter sent by e-mail, member password to our site ([www.MarylandDance.org](http://www.MarylandDance.org)), threaded discussions, advanced dance festival information, dance up-dates, more!

**PRIVACY NOTICE:** Maryland Council for Dance does NOT share your email address or other information.

**DUES CATEGORIES:**

<b>STUDENT/UNDERGRADUATE- \$15</b> (elementary through high school or full-time college undergraduate)	<b>INDIVIDUAL- \$35</b> (one person, not a student)	<b>ORGANIZATION- \$70</b> (a single group using the same name, such as a school, studio, or business - for example, each school in a county must join as separate organization)
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**DONOR CATEGORIES:** Donations over and above dues. Donors listed on the web site and in the festival brochure.

<b>FRIEND - \$85+</b>	<b>SUPPORTER - \$125+</b>	<b>BENEFACTOR - \$250+</b>	<b>PATRON - \$500+</b>
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**PLEASE PRINT IN CAPITAL LETTERS - \*REQUIRED INFORMATION**

**CHECK MEMBERSHIP OR DONOR TYPE:**

STUDENT   
  INDIVIDUAL   
  ORGANIZATION   
  FRIEND   
  SUPPORTER   
  BENEFACTOR   
  PATRON

**INDIVIDUAL NAME\*** \_\_\_\_\_ **HOME PHONE\*** \_\_\_\_\_

**WORK PHONE** \_\_\_\_\_ **FAX** \_\_\_\_\_

**OR (GROUPS ONLY)**

**ORGANIZATION NAME\*** \_\_\_\_\_

**ORGANIZATION CONTACT PERSON\*** \_\_\_\_\_

**ORGANIZATION PHONE\*** \_\_\_\_\_ **ORGANIZATION FAX** \_\_\_\_\_

**INDIVIDUALS AND GROUPS COMPLETE BELOW**

**ADDRESS\*** \_\_\_\_\_

**CITY\*** \_\_\_\_\_ **COUNTY\*** \_\_\_\_\_ **STATE\*** \_\_\_\_\_ **ZIP\*** \_\_\_\_\_

**E-MAIL\*** \_\_\_\_\_

**\*REQUIRED INFORMATION**

<b>Check area(s) of work:</b> <input type="checkbox"/> teacher <input type="checkbox"/> college.univ. <input type="checkbox"/> studio <input type="checkbox"/> community <input type="checkbox"/> school <input type="checkbox"/> performer <input type="checkbox"/> media/press <input type="checkbox"/> historian <input type="checkbox"/> dance <input type="checkbox"/> medicine <input type="checkbox"/> recreation <input type="checkbox"/> choreograph <input type="checkbox"/> other _____	<b>Check dance interest(s):</b> <input type="checkbox"/> ballet <input type="checkbox"/> modern <input type="checkbox"/> jazz <input type="checkbox"/> tap <input type="checkbox"/> folk/ethnic <input type="checkbox"/> theater <input type="checkbox"/> therapy <input type="checkbox"/> criticism <input type="checkbox"/> notation <input type="checkbox"/> history <input type="checkbox"/> theory <input type="checkbox"/> medicine <input type="checkbox"/> performance	<p><b>TO PURCHASE A MEMBERSHIP CERTIFICATE, <u>enclose \$3 additional</u> and PRINT your name below exactly as you wish it to appear on your certificate.</b></p> <p style="text-align: center;">_____</p>
<p><b>ORGANIZATION MEMBER BENEFIT:</b> To have your organization's webpage linked directly from the Maryland Council for Dance webpage, please <b>PRINT</b> the URL here:</p> <p style="text-align: center;">_____</p>		
<p><b>CHECK PREFERENCES:</b>  <b>NEWSLETTER:</b>    <input type="checkbox"/> ON LINE    <input type="checkbox"/> EMAIL    <input type="checkbox"/> BULK MAIL  <b>EMAILS:</b>    <input type="checkbox"/> YES, SEND DANCE INFORMATION BETWEEN</p>		

**AMOUNT ENCLOSED: \$** \_\_\_\_\_ **(dues)**  
 \$ \_\_\_\_\_ **(certificate)**  
**TOTAL ENCLOSED \$** \_\_\_\_\_

I will volunteer for the following MCD committees: <input type="checkbox"/> Dance Festival <input type="checkbox"/> Program/Planning <input type="checkbox"/> Calendar <input type="checkbox"/> Membership <input type="checkbox"/> Fund Raising/Grants <input type="checkbox"/> Publicity
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**MAKE CHECK OUT TO "MARYLAND COUNCIL FOR DANCE" AND MAIL TO:**  
**Karen L Smith, Washington College, 300 Washington Ave., Chestertown, MD 21620**