THE CANADIAN DANCESPORT



President: Ann Harding-Trafford. ON; Executive: Meryem Pearson, PQ, Jane Edgett, ATL, Barbara Child, BC

AMATEUR INSTRUCTOR EXAMINATION

APPLICATION FORM

STYLE - STANDARD / LATIN AMERICAN (Please Circle)
NAME OF CANDIDATE
NAME OF REGIONAL ASSOC.
ADDRESS OF CANDIDATE
TELEPHONE NUMBER
EMAIL
EXAMINATION FEE: \$75.00
Please make cheque payable to: Canadian Dancesport Federation
Send Application to: Patricia Goh, Examination Coordinator
PO Box 1005, TDC Postal Station, 77 King St. West, Toronto ON M5K 1P2
CANDIDATE'S SIGNATURE: Date:
(Office only) EXAMINER/EVALUATOR

EXAMINATION DATE____

(Office only)