



JUNIOR MEMBERSHIP APPLICATION

Junior Members must be age 11 to 16

Date_____

NAME_____

ADDRESS_____

CITY_____ STATE_____ ZIP_____

PHONE_____ BIRTHDATE_____ AGE_____

EMAIL ADDRESS:_____

SADM MEMBER_____

STUDIO NAME_____

STUDIO ADDRESS_____

STUDIO PHONE_____

TYPES OF DANCE STUDIED_____

YEARS STUDIED _____

CONVENTIONS ATTENDED_____

Attach a brief essay explaining why you would like to become a Junior Member in this organization and how this would be beneficial to you.

SADM Member Signature

Applicant Signature

*Applications must be postmarked by October 7, 2011
Mail the completed form with the \$20.00 membership fee to:*

**Kayla Thompson
Junior Memberships
8065 Cinders Road, Bartlett, TN. 38133**

Only checks payable to SADM from SADM Member teachers will be accepted.