



dance and the Child international
United States of America Chapter
www.daCiUSA.org

daCi USA Individual Membership Registration

daCi membership runs from January 1 – December 31

Please clearly complete the information below and return with check to:

daCi USA
c/o Carol Day, Treasurer
3257 Big Spruce Way
Park City, UT 84098

INDIVIDUAL ONE YEAR MEMBERSHIPS

- ☐ \$65 Professional (\$30 to daCi USA/\$35 to daCi International)
- ☐ \$30 Retired (\$15 to daCi USA/\$15 to daCi International)
- ☐ \$30 Student (\$15 to daCi USA/\$15 to daCi International)

MEMBERSHIP TYPE

- ☐ New ☐ Renewal

Member Name: _____

Member Email: _____

Title/Occupation/Description (15 words or less) for the Directory:

Mailing Address: _____

City: _____ Work Phone: _____

State: _____ Cell Phone: _____

Zip: _____ Home Phone: _____

If you have a website, would you like this site listed on the LINKS page of the daCi USA site, www.daCiUSA.org?

If yes, please indicate your web site address: _____

Dues Acknowledgement: Mailed Hard Copy _____ or Attachment to email (preferred) _____

Make checks payable to daCi USA

Member of Conseil International de la Danse UNESCO Paris



dance and the Child international
United States of America Chapter
www.daCiUSA.org

daCi USA Group/Organization Membership Registration

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daCi USA
c/o Carol Day, Treasurer
3257 Big Spruce Way
Park City, UT 84098

CHILDREN'S DANCE GROUP MEMBERSHIPS (Dancers 18 years and under)

Group membership includes membership privileges for a total of two adult group members.

- ☐ \$75 Children's Dance Group - 1 year (\$35 to daCi USA/\$40 to daCi International)
- ☐ \$200 Children's Dance Group - 3 years (\$80 to daCi USA/\$120 to daCi International)

ORGANIZATION/INSTITUTION (Adult dance companies, studios, universities, corporations etc.)

Organization membership includes membership privileges for a total of five adult group members.

- ☐ \$100 Organization/Institution - 1 year (\$40 to daCi USA/\$60 to daCi International)
- ☐ \$250 Organization/Institution - 3 years (\$70 to daCi USA/\$180 to daCi International)

MEMBERSHIP TYPE

- ☐ New
- ☐ Renewal

Group/Organization Name: _____

Primary Contact Name: _____

Group/Primary Email: _____

Title/Occupation/Description (15 words or less) for the Directory: _____

Mailing Address: _____

City: _____ Work Phone: _____

State: _____ Cell Phone: _____

Zip: _____ Home Phone: _____

Additional Member Name: _____ Email: _____

Additional Member Name: _____ Email: _____

Additional Member Name: _____ Email: _____

Additional Member Name: _____ Email: _____

If you have a website, would you like this site listed on the LINKS page of the daCi USA site, www.daCiUSA.org?

If yes, please indicate your web site address: _____

Number of children in your group or organization _____

Dues Acknowledgement: Mailed Hard Copy _____ or Attachment to email (preferred) _____

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