



PROFESSIONAL MEMBERSHIP APPLICATION & AGREEMENT FORM

DANCE VISION INTERNATIONAL DANCE ASSOCIATION®

An Invitation To Excellence . . . An Opportunity To Join Hands

Instructions: Please fill out the entire application. Incomplete information may cause a delay in processing. Please carefully review all terms and conditions of this application (front and back) before signing. By signing below you are agreeing to abide by all of the terms of membership contained in this application. ProDVIDA reserves the right to accept or reject any application. You are an official member of ProDVIDA® only when you have completed and passed a DVIDA® professional examination. A ProDVIDA Examination application and all appropriate fees must accompany this Membership application. Your Membership application will be processed only after ProDVIDA has received a complete examination and the scores are tabulated resulting in passing or better marks.

(PLEASE PRINT CLEARLY)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: () _____ Fax: () _____ Cell: () _____

Email: _____ Website: _____

Please answer the following questions:

- 1. Have you ever been suspended or disbarred from any dance-related organization?
 No Yes (please attach a separate sheet with details)
 - 2. Are you currently under any investigation for any ethics violation of any dance-related organization?
 No Yes (please attach a separate sheet with details)
 - 3. Have you been convicted of any felony within the last ten (10) years?
 No Yes (please attach a separate sheet with details)
 - 4. Do you have any physical, mental or emotional disability that would prevent you from being able to fulfill the duties of a Professional Teacher?
 No Yes (please provide details)
- I wish to use my existing qualifications with another society. (Please provide proof of certification)
- I wish to be examined by DVIDA at a later date.

Annual Membership Fee*** Please Circle \$40 - 1 year, \$60 - 2 years, \$90 - 3 years (per person)

Mail or Fax Application to: Renee Coates
Phone 800-851-2813 Dance Vision
Fax 702-256-4227 9081 W. Sahara Ave.,
Las Vegas, NV 89117, USA email: Renee.Coates@DanceVision.com

Method of Payment Check # _____ Visa MasterCard Amex Discover

Credit Card No. _____ Expiration Date: _____

I hereby authorize the use of the above credit card for the amount stated as evidenced by my signature below and have read and understand all terms and conditions set forth in this application.

Authorize Charge \$ _____ Signature of Card Holder _____

*** SEE REVERSE SIDE FOR ADDITIONAL TERMS AND CONDITIONS ***

The undersigned applicant agrees to abide by all terms and conditions set forth in this Application Agreement and represents that he/she has full authority to sign on behalf of the Applicant.

Applicant's Signature: _____ Date _____

Member of the National Dance Council of America

ADDITIONAL TERMS AND CONDITIONS

The following additional terms and conditions are included in this Application Agreement:

1. Qualifications. A candidate for Professional Membership in ProDVIDA must be an individual eighteen (18) years of age or older who is a professional dance teacher or professional dance competitor and has met the ProDVIDA standards of certification as such.

2. Membership Rights and Limitations. Professional Teacher Membership in ProDVIDA entitles you to membership in a dance industry association that will include dance studios, professional competitors and instructors, students, and general members of the public who have an interest in promoting the art of dance. Charter Membership in ProDVIDA is limited to the first 200 Professional Members or as otherwise provided in the By-laws. ProDVIDA is a for-profit Division of W.D. Eng, Inc., dba Dance Vision, a Nevada corporation. Membership in ProDVIDA does not provide any right, title, interest, security, ownership, stock, or equitable participation in the Corporation or any participation in profits, whatsoever. The By-Laws of ProDVIDA have been provided as part of the Application Agreement and are hereby incorporated by reference into this Agreement. By signing this Application Agreement you are agreeing to abide by the By-Laws of ProDVIDA. If you have not received a copy of the By-Laws, please contact ProDVIDA immediately for a copy prior to signing and forwarding your application.

3. Certifications And Examinations. ProDVIDA will make available its examiners to certify ProDVIDA Professional Members for a separate fee. The costs associated with these examinations including but not limited to, travel expenses for examiners, lodging expenses for examiners, certificates and awards are separate expenses to be borne by the member. Examination is not included in the ProDVIDA membership fee; rather it is a separate fee service available only to ProDVIDA members.

4. Certificates and Awards. All certificates and awards produced by ProDVIDA are available for purchase for a fee separate and apart from the membership fee. Said awards may only be presented if ProDVIDA examination guidelines are satisfied.

5. Participation in National Events. Invitation to participate in ProDVIDA events such as Trophy Balls, Teacher Training Programs and ProDVIDA conferences is at the sole discretion of ProDVIDA. The cost to participate in such events is the sole responsibility of the ProDVIDA member and is not included in the membership fee.

6. Code of Ethics. Each Professional Teacher agrees to abide by the code of ethics set forth in the By-Laws of ProDVIDA

FOR DVIDA USE ONLY

DVIDA hereby _____ Accepts _____ Rejects this Application as of _____

Your DVIDA membership number is: _____

by _____ Title _____



CODE OF ETHICS

Section 1. Purpose. A Code of Ethics is hereby established to maintain a high standard of dance conduct and social integrity among all members to sustain and enhance the reputation and integrity of DVIDA in order to promote the art of dance throughout the world. This Code of Ethics is binding upon all members of ProDVIDA.

Section 2. Dance Conduct. Any member participating in a dance-related event shall conduct himself/herself in a manner that promotes respect and social grace. A member participating in a dance competition shall abide by all of the applicable rules and standards of conduct in that competition.

Section 3. Social Integrity. All members are expected to conduct himself/herself in society as a law-abiding citizen befitting of a person promoting the art of dance for the purpose of facilitating harmony and unity among fellow beings.

Section 4. Code Violations. Any member violating these Code of Ethics is subject to termination of his/her/its membership by the Executive Director upon receipt of a bona fide complaint and after due consideration of all material facts. The Executive Director may issue a letter of admonition when circumstances do not warrant termination of membership. Any termination imposed by the Executive Director may be appealed to the Board of Directors of Dance Vision in writing within thirty (30) days of notice of termination. No refund of any membership fee will be provided to any member terminated herein for just cause.

ProDVIDA PROFESSIONAL EXAMINATION APPLICATION

APPLICATION WILL BE **DENIED** IF ALL INFORMATION IS NOT SUPPLIED

NAME: _____

ADDRESS: _____

CITY: _____ State: _____ Zip Code: _____

E-MAIL: _____ PHONE # () _____

Membership requirements include completing and passing a DVIDA professional examination The ProDVIDA Application for Membership and all appropriate fees MUST accompany this form (please include separate checks for the examination and membership fees).

If you want to learn more about ProDVIDA examinations and Membership requirements, please contact Renee at 800-851-2813 or 702-256-3830.

Candidate is applying for the following ProDVIDA Professional Examination(s): (Please check all that apply)

_____	Junior Associate Test Smooth & Rhythm/Smooth/Rhythm	\$50
_____	Junior Associate Test Latin	\$50
_____	Junior Associate Test Standard	\$50
_____	Associate (Bronze) Rhythm	\$75
_____	Associate (Bronze) Smooth	\$75
_____	Associate (Bronze) Latin	\$75
_____	Associate (Bronze) Standard	\$75
_____	Associate (Bronze) Argentine Tango	\$35
_____	Associate (Bronze) Nightclub Two-Step	\$35
_____	Associate (Bronze) Salsa	\$35
_____	Master (Silver) Rhythm	\$75
_____	Master (Silver) Smooth	\$75
_____	Master (Silver) Latin	\$75
_____	Master (Silver) Standard	\$75
_____	Master (Silver) Argentine Tango	\$75
_____	Grand Master (Gold) Rhythm	\$75
_____	Grand Master (Gold) Smooth	\$75
_____	Grand Master (Gold) Latin	\$75
_____	Grand Master (Gold) Standard	\$75
_____	Grand Master (Gold) Argentine Tango	\$75
_____	Recertification*	\$35
	*(A ProDVIDA Recertification Request must accompany this application)	
_____	Junior Associate One Dance	\$20 per dance
	please specify dance(s) _____	
_____	Full Level One Dance	\$30 per dance
	please specify dance(s) _____	

Total of fees paid to ProDVIDA \$ _____

3 Ways to Apply

Mail:
DVIDA – Attn: Renee
9081 W. Sahara Ave. Suite 100
Las Vegas, NV 89117 – USA

Fax:
702-256-4227

Or Call:
Renee
M-F 8:30 am to 4:30 pm (pst)
800-851-2813 Or 702-256-3830

Method of Payment (please check one)

_____ VISA _____ MASTERCARD _____ AMEX _____ DISCOVER _____ CHECK (# _____)

Credit Card #: _____ Expiration Date: _____

I hereby authorize the use of the above credit card for the amount stated as evidenced by my signature below.

Authorize Charge: \$ _____ Signature of Card Holder: _____

The undersigned applicant has applied to be examined by a Dance Vision International Dancer's Association Examiner and certifies that he/she is at least 18 years of age and a qualified member of ProDVIDA.

Applicant's Signature: _____

Date: _____