

	Dance Critics Association	Membership Form Please complete this form and mail to: DCA Membership Services PO Box 1882 Old Chelsea Station New York, NY 10113
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I wish to join DCA

I wish to renew my membership

Please select a membership category:

<input type="checkbox"/> Voting Member (\$50) Open to anyone whose criticism is published or broadcast. Please include photocopies of up to three pieces.	<input type="checkbox"/> Associate member (\$50) Open to teachers, historians, choreographers, dancers, publicists, and all others interested in dance writing and scholarship.	<input type="checkbox"/> Student*/Senior Member (\$25) Open to full-time students and those over 65 years of age. Please include a copy of current ID.
<input type="checkbox"/> Institutional Member (\$75) Open to dance companies, libraries and other organizations; entitles member to two copies of DCA News.	<input type="checkbox"/> Benefactor Member (\$100) Open to anyone. This membership includes a donation to DCA's operating fund.	<input type="checkbox"/> Senior Voting Member (\$25) Open to anyone over the age of 65 whose criticism is currently published or broadcast. Please include copies of current ID and up to three pieces.

* Student rates are applicable through the first year following graduation. Limited membership fee assistance is available upon request, based on need.

Please print clearly.	Membership Fee: \$ _____ (As noted above) Postage: \$ _____ (\$15.00 additional fee is required for non US residents) Tax-deductible donation: \$ _____ (not required, but appreciated) TOTAL: \$ _____
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Name: _____

Address: _____

City: _____ State: _____

Zip/Postal Code: _____ Country: _____

Home Phone: _____ Mobile Phone: _____

Office Phone: _____ Fax: _____

Email address: _____

Website: _____

Publication or media outlet: _____

If not a critic, area of involvement: _____

Please make checks payable to Dance Critics Association. To pay for your membership with a credit card, please go to: <http://www.dancecritics.org/membershippayment.html>