

Dance Alliance

Membership Application

Choreographers, Dancers, Teachers, Students, and Lovers of Dance Sharing
Resources

YES, I want to become a member of the Dance Alliance and show my support for
dance in the Capital District and Saratoga Regions.

Enclosed is my membership at the following level:

\$10 Student/Senior (Age 63)

\$15 Individual

\$20 Organization

\$25 Friend

\$50 Angel

\$100 Patron

Donation

Name: _____

Organization: _____

Address: _____

City: _____ State: _____

Zip: _____ Phone: _____

Email: _____

Area(s) of special interest _____

Make checks payable to Dance Alliance and mail to:

Dance Alliance

c/o Gail Tassarotti

52 Marriner Avenue Albany, NY 12205

P.O. Box 83 ◦ Saratoga Springs, NY 12866

www.dancealliance.org

capitalregiondancealliance@gmail.com