Canadian Dance Teachers Association

FORM "C"

CANDIDATES FOR BALLET STUDENT GRADE EXAMINATIONS

NAME OF STUDIO: _____

NAME OF MEMBER TEACHER: _____

*Please use separate forms for each Member Teacher entering students for examinations.

MEMBERSHIP STATUS: _____

(Note: Please clearly print names as no responsibility can be accepted for errors on certificates arising from errors on forms)

GIVEN NAME	LAST NAME	AGE	GRADE	FEE

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