Canadian Dance Teachers Association

FORM "C"

CANDIDATES FOR TAP 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

yellow