

International Tap Association Rep Application Form

Please return this form by mail or email to the ITA Office.

PO Box 150574, Austin, TX, 78745 USA e-mail info@tapdance.org

Please type or print. If you have questions, contact the ITA office or info@tapdance.org 303.443.7989.

Name

Affiliation(s) (studio, learning institution, company, etc.)

Street Address

City, State/Province, Zip Code, Country

Phone #

Alternate Phone # (cell phone, etc.)

Fax #

E-mail Address

Website (if applicable)

Please describe the geographic area you would like to represent as a Community Rep as best you can.

Town(s), City(ies) and/or County(ies)

Zip(s)/Postal Code(s) if available

(In) State/Province

(In) Country

Other Information

Please briefly explain why you would like to represent the International Tap Association. What contributions do you feel you can make to the field of tap through the ITA and its advocacy programs? Use the back of this form or attach additional sheets if you would like more room to respond.

Please attach one or more of the following and check the appropriate circle(s) to indicate what you have attached.

Resume Biography Press Kit Other _____

If you would like to recommend one of your colleagues for a Community Rep position, please do so below:

Name

Affiliation(s)

Phone #

E-mail Address

Please feel free to use the back of this form or attach additional sheets if you would like to comment further.