



Dance/USA Philadelphia

1427 Spruce Street, Suite 1F, Philadelphia, PA 19102  
www.danceup.org

## DancePass Renewal Form

Full Name: \_\_\_\_\_

DATE: \_\_/\_\_/\_\_\_\_

E-mail (If changed): \_\_\_\_\_

Mailing Address (If moved): \_\_\_\_\_

Phone (If different): \_\_\_\_\_

Website (If new or if you think we don't have it): \_\_\_\_\_

Your professional titles include: (Please check all that apply and list name of organization.)

Dancer \_\_\_\_\_

Choreographer \_\_\_\_\_

Educator \_\_\_\_\_

Arts Administrator \_\_\_\_\_

Designer (please specify type) \_\_\_\_\_

Recent performances/projects: (Please include date.)

\_\_\_\_\_  
\_\_\_\_\_

Please use the space below to write any additional information about yourself as a dance professional in the greater Philadelphia region that may help us to assess your eligibility for a DancePass.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email this form to Gabrielle Revlock, [gabrielle@danceusaphiladelphia.org](mailto:gabrielle@danceusaphiladelphia.org) or bring it by the office!

**Office Use Only:**

Date Received: \_\_\_\_\_

Amt Paid: \_\_\_\_\_

Pay Type: \_\_Cash/ \_\_Check/ \_\_Card

Approved? Y / N Pass Given? Y / N

Staff Initials: \_\_\_\_\_