APPLICATION FORM Request of LUDT AFFILIATION

General Data

Name of the School*

Forwarding Address*

Complete address*

Phone and/or mobile*

Email Address*

Website

Date of Foundation

Name of the Director/Artistic Manager/Main Teachers*

Typology of Corporation*

Cooperation with Public/Regional/Local Agencies (if any, specify which kind)

Cooperation with Public/Private Schools (if any, specify the kind of School)

Whole number of Students*

Students (3-11 years old)

Students (12-18 years old)

Adult Students (over 18)

Logistic Data. Self- evaluation questionnaire

Number of Dance Halls*:

Measurement (in meters) of Dance Halls (for any)*:

Presence of any necessary requirements of Dance Halls - mirrors, barres, apposite floor, etc. (please, specify the presence of any element)*:

Changing rooms and appropriated toilets*:

Secretariat schedule:

Please, notice that the indication of elements indicated with * is compulsory.

I declare to approve the use of the data here indicated, Art.13 DL n.196/2003 (Italian Privacy Law).