

MADN UK Membership and Teachers/Performers Insurance Scheme

This form can be downloaded at www.mosaicdancenetwork.org/membership or email membership@mosaicdancenetwork.org
Please complete the first section of this form and then the relevant membership or insurance section.

Your details (please print):

Name

Address

Postcode

Phone Email

Website Stage name

DANCE EXPERIENCE – please tick (✓) all that apply

Performer Student Teacher Event organiser Musician Trader

- Do you want to be contacted by:
(please tick all that apply) email post phone
- Would like your name to be on our
useful links page Yes No
- Would like your name to be on our
MADN BnB hub page Yes No
- What information do you want made publicly available?
(please tick all that apply)
phone mobile email website address
*We do not encourage personal emails as this may open you up
to phishing, etc.*
- Any links you think would be of benefit to
our members? Yes No
Please state
.....
.....
- Do you want to be kept informed of MADN
updates and events? Yes No
- Should we have a newsletter, would you like
to subscribe to it? Yes No
- Are you happy to be contacted for
marketing purposes? Yes No
- Any other information you would like to share with us:
Please state
.....
.....

For teachers, your consent is needed for these:

10. Would you like your details included in the Teacher's Listing:

a) in Mosaic magazine* Yes No

b) on MADN's website* Yes No

* please note that you must have insurance to be included on these lists

Membership Application

MEMBERSHIP OPTIONS – please tick (✓)

UK: £25 – one year online/printed magazine (from next issue issued) Overseas: £35 – one year online/printed magazine

MADN Teachers Insurance Application

This insurance is for MADN members only, resident in the UK. It runs in line with membership renewal.

Mosaic membership no. In what counties do you teach?

During the past three years has anyone made a claim against you? YES NO IF YES, please give full details:

Have you ever been convicted of any offence involving dishonesty of any kind? YES NO

I agree to be bound by the conditions laid down by Mosaic Arabic Dance Network-UK and relevant insurance company.

Payment for one year is £40.00.

PAYMENT: Please state what you are paying for: Membership Insurance

By cheque or postal order made payable to Mosaic Arabic Dance Network and send to:

Rosemary Le Fevre, 2 St Anns Road, Barnes, London, SW13 9LJ

Online by PayPal on our website: www.mosaicdancenetwork.org

By BAACS: Sort code: 51-70-15 / Account Number 78531721 and add your name

This information is held on computer by MOSAIC, if you have any objection to this please tick the box

We may occasionally disclose this information to other members of MOSAIC. If you have any objection to this please tick the box

Signed Date

Please email this form to: membership@mosaicdancenetwork.org

PLEASE NOTE THAT IF YOU ARE INSURED BY MADN YOU MUST KEEP UP YOUR MEMBERSHIP OTHERWISE YOUR INSURANCE WILL BE INVALID.