CALLERLAB Convention Fee Waiver Form For Youth Callers

Executive Committee Approval January 31, 2013

Applicant's Name:		
Address:		
Street Name		
City	State	Zip Code
Telephone: ()	E-mail:	
Date of birth:(Ap	plicant must be under the a	ge of 25 at the time of Convention)
Applicant (Caller) Dancing an	d Calling History	
How long have you been squared How long have you been calling Have you attended any other application?	ng?	ALLERLAB Conventions prior to this
• •	•	nded and give the dates(s) of attendance.
Caller School/Clinic	Da	te
Which CALLERLAB Conventi		

Please include a typed biography on a separate sheet that summarizes your calling activities to date. It is important that you also state your future intention(s) regarding calling and how you expect attendance at Convention will further those plans.

If your Application is approved, a second report explaining what the experience meant to you is requested by the CALLERLAB Home Office within two weeks following the close of the Convention.

APPLICATIONS MUST BE RECEIVED BY THE CALLERLAB HOME OFFICE NO LATER THAN TWO WEEKS PRIOR TO THE CONVENTION YOU PLAN TO ATTEND.

Please mail your application or a request for information to: CALLERLAB (Attn: YOUTH Committee Fee Waiver Form) 200 SW 30th St., Suite 104 Topeka, KS 66611