CALLERLAB Convention Fee Waiver Form For International Callers

Executive Committee Approval September 25, 2017

Applicant's Name:		
Address:		
Street Name		
City	State	Zip Code
Telephone: ()	E-mail:	
(Applicant must be from a co	untry outside of the USA and No	orth American Continent)
Applicant (Caller) Dancing ar	nd Calling History	
How long have you been squ How long have you been call Have you attended any other application?	ling?	ERLAB Conventions prior to this
		ed and give the dates(s) of attendance.
Caller School/Clinic	Date	
Which CALLERLAB Convent	tion do you plan to attend?	
	7 - 1	

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 200 SW 30th St., Suite 104 Topeka, KS 66611