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Dance Audition Form 2019-2020

Name	Phone					
Mailing Address		City & State	Zip			
Email Address (please print clearly)						
Current Grade Level	Grade Level Name of School You Currently Attend					
Which Class(es) are you auditioning for?						
EITHER Intermediate OR Advance appropriate placement for me at this t		pt a position in the level the jud	lges determine to be the most			
ONLY Intermediate Dance	_ ONLY Advanced/Ensen	nble				
The next section is ONLY for		ining. Please do not incl ce program.	ude your training with the			
Dance Training:						
Ballet: Currently training Yes No	#of Years_	Studio or Schoo	l Name			
Modern: Currently training Yes No	#of Years_	Studio or Schoo	l Name			
Contemporary: Currently training Yes	No #of Years_	Studio or Schoo	l Name			
Jazz: Currently training Yes No	#of Years	Studio or Schoo	l Name			
Other Dance Styles: Yes No						
What style:						
Currently training Yes No	#of Years	_ Studio or School Name				
What style:						
Currently training Yes No		_ Studio or School Name				
What style:						
Currently training Yes No	#of Years	Studio or School Name				

Why are you auditioning for this class; what do you hope to achieve in it?

 $Please\ list\ any\ physical\ or\ health\ problems\ you\ have\ that\ MIGHT\ interfere\ with\ your\ participation\ in\ this\ class:$