

Pre-Professional Program Academic Year 2017 / 2018

AUDITION APPLICATION FORM

Student Name:					Circle:	M	F Age:_	E	Birth Date:	
Parent Name(s):					Grade:		_School:_			
Contact Numbers: Home:				Work:			Mob	ile:		
Address:					City/State	:				
Zip Code:	Par	ent(s) Emai	l:							
		clude one l and o	headsh one pho	ot (all applican oto in tendu a	ts), one photo la seconde (st	o in 1st a cudents	arabesqu 7- 10).	e (students	10 and older),	
DANCE TRAINING		_								
Please list your previous of	lance trainin	g, after age	7. Inclu	de dates and nar	nes of studios/s	chools a	nd teacher	rs.		
		CU	JRREN	T SCHOOL A	AT STEPS ST	TUDEN	NTS:			
Academic Year 16/17 Bal	let Class/Lev	vel and Inst	ructor: _							
				NEW ST	UDENTS:					
Ham did man basa aba	4			NEW SI	ODENIS.					
	How did you hear about us? Magazine? Big Apple Parent Dance M		agazine Dance Spirit		Pointe		Other:			
Online? Big Ap	ple Parent	Dance Mag	gazine	Dance Spirit	Pointe		Other:_			
Friend- Who may we thank?				Other? Plea	ase specify					
School(s)		Teacher(s)	Years Attended (Please include dates)		Ballet Training (# of classes per week)			Other Disciplines (# of classes per week)	
			CITI	MED DDOCD	ANGRYODIZ	HODG				
Schoo	al(s)		SUN	IMER PROGR Tear	AMS/WORKS cher(s)	SHOPS:		Vear	rs Attended	
De11001(0)				1000	cher(s)				include specific dates)	
									_	
Please outline any profes	ssional / per	formance e	xperien	ce in the space l	below:					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										
35.00 Audition Fee										
Iethod of Payment										
olease circle one)	AMEX		MC	VIS	SA	CHECK	K (please n	nake payable	to 'Steps Studio Inc.')	
redit Card Number:					Ex	piration	Date:			
ardholder Name (Please Pr						_				
arunoidei Name (Please Pi	ші,									
ignatura:						Data				