



Application for the 2014-2015 Competition Class Program

Student: _____ Age: _____ DOB: _____

Parent: _____ Phone #: _____

Which Competition Class are you interested in? (Please check which classes)

Mini Team (Age 7-9) _____ Hip Hop (Age 10-Teens) _____ Contemporary Jazz (Age 10-Teens) _____ Tap (Age 10-Teens) _____

Dance History - Please fill out the chart below.

Style	# of Years taken	At What Age	Teacher(s)	Studio
Ballet				
Contemporary				
Hip Hop				
Jazz				
Lyrical				
Modern				
Tap & Ballet				
Tap & Jazz				
Theatre				

Why do you want to dance in the competition class program? _____

Do you participate in other theatre, dance, gymnastics or sports programs? _____

Office Use Only

Teacher: _____

Approved: YES NO