

# Audition Form

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- YES, I would like to audition for the **TSSD Dance Company**
- Level 1 (part-time program)
- Level 2 (full program)

Dancers Name: \_\_\_\_\_

Age: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_  
Please print

Dance Studio you are currently attending: \_\_\_\_\_

Other Dance Studio's attended: \_\_\_\_\_

Years Training: \_\_\_\_\_ Disciplines studied: \_\_\_\_\_

Indicate what discipline(s) you will audition for: Ballet  Jazz  Hip Hop  Tap

Comments: \_\_\_\_\_

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Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Postal Code

e-mail: \_\_\_\_\_  
please print