



## AUDITION FORM

### Company Auditions:

First - Fifth Grade students: Sunday, August 9<sup>th</sup> from 2:00-3:30pm

Sixth - Twelfth Grade students: Monday, August 10<sup>th</sup> from 5:15-8:00pm

- All other students please contact Helen McDuffie at [studio@legacyallsports.com](mailto:studio@legacyallsports.com) to schedule an evaluation.

### Student Information

Name: \_\_\_\_\_ Last: \_\_\_\_\_

Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age as of Jan. 1, 2016: \_\_\_\_/\_\_\_\_/\_\_\_\_

Time you can be here by (Mon-Fri): \_\_\_\_\_

School Grade 2015-2016: \_\_\_\_\_

How many days per week are you willing to practice?: \_\_\_\_\_

Is your child interested in competing this season?: \_\_\_\_\_.

Please list your child's previous dance or gymnastic training: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Parent Information:

#### Parent/Guardian #1:

First: \_\_\_\_\_ Last: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_



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### Competition/Technique Information

- 1.) How many routines would you like your child placed in? (Can list specific number or list OPEN—keep in mind dancers will only be placed in routines the choreographer sees fit.):

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- 2.) Is your child interested in competing with a solo, duet, or trio this year? If so, please list style, choreographer preference, and(or) duet/trio preference (NOTE: Dancers may compete with more than one extra number and guest choreographers will be available for an additional fee):

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- 3.) Please look over our Level 1-5 technique classes and costs and if there is a certain level your dancer is interested in taking please list below:

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- 4.) Are you interested in traveling to a National Competition the Summer 2016:

YES

NO

I understand that LDC is a commitment both financially and also with time. I understand that more than three unexcused absences may result in removal from a routine. I have read and agree to the above statement.

Please initial: YES \_\_\_\_\_ NO \_\_\_\_\_