

PASO ROBLES
CHAMBER BALLET COMPANY

YOUTH-Company Audition Form

2009 – 2010

(Please Print Neatly)

Last Name _____ **First Name** _____

Date of Birth _____ **Current Age** _____ **Male or Female**
Address

City _____ **State** _____ **Zip** _____

Phone #'s (hm) _____ **cell**

E Mail Address _____

Parent /Guardian Name _____

Address _____

City _____ **State** _____ **Zip** _____

Current Dance Studio _____

Years of Training (Ballet) _____ **Years on Pointe** _____

Total hrs per week in ballet _____ **Total hrs per week on pointe** _____

Performance Experience (Please write in short paragraph)

Why do you want to be a Ballet Company Member? (Please write on back)

Dancers Signature

Parents Signature

