

# Ballet Frontier of Texas, Inc.

## Company Audition\*

Saturday, August 22, 2009

Audition #: \_\_\_\_\_

### STUDENT INFORMATION

Student Name: \_\_\_\_\_

Nickname: \_\_\_\_\_

Birthdate (m/d/y): \_\_\_\_\_

Age: \_\_\_\_\_

Grade: \_\_\_\_\_

Height: \_\_\_\_\_

Leotard Size: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Primary E-mail: \_\_\_\_\_

### PARENT INFORMATION

Father's Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Phone: \_\_\_\_\_

### EXPERIENCE (# of years):

Ballet: \_\_\_\_\_

Pointe: \_\_\_\_\_

Modern: \_\_\_\_\_

Ballet School: \_\_\_\_\_

Jazz: \_\_\_\_\_

Other: \_\_\_\_\_

### EMERGENCY CONTACTS

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

Phone: \_\_\_\_\_

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

Phone: \_\_\_\_\_

### This Form must be signed and returned prior to audition

*I hereby release Ballet Frontier of Texas, Inc., its, agents and employees, from all liability for personal injury, theft or property damage occurring on or off the Schools premises, whether or not caused by the negligence of Ballet Frontier of Texas, Inc., its agents or employees.*

*Also,*

*I hereby give permission to Ballet Frontier of Texas, Inc. to use photographs taken in conjunction with The Nutcracker auditions for promotional purposes.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/guardian signature (if student is under age 18)

### A non-refundable audition fee of \$20 is due at the time of audition

Please make checks payable to **Ballet Frontier of Texas, Inc.**

Payment: \_\_\_\_\_

Check#: \_\_\_\_\_

Cash: \_\_\_\_\_

\* Company audition will also serve to audition student for Ballet Frontier's 2009 Nutcracker Performance