



2024/2025 SEASON  
APPLICATION DUE APRIL 15TH  
PLEASE SUBMIT ONLINE ONLY

DANCER'S NAME: \_\_\_\_\_

DANCER'S AGE: \_\_\_\_\_

DANCER'S BIRTHDATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

GUARDIAN PHONE # \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

PARENT/GUARDIAN EMAIL: \_\_\_\_\_

IF YOU ARE COMING FROM A DIFFERENT STUDIO, WHICH STUDIO? \_\_\_\_\_

\_\_\_\_\_

DO YOU HAVE EXTRA CURRICULAR ACTIVITIES THAT MIGHT CONFLICT? Y N

LIST DAYS DANCER **CANNOT** DANCE: \_\_\_\_\_

WHAT GROUPS ARE YOU AUDITIONING FOR? \_\_\_\_\_

WOULD YOU LIKE TO BE CONSIDERED FOR VAULT DANCE PROJECT? Y N

HOW MANY DANCES WILL YOU COMMIT TO? \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_