

SAN ANTONIO METROPOLITAN BALLET
Season 36 ~ 2019/2020 Company Audition Registration Form

Check Audition Date You Will Attend
5/18/19 ___ Trainees, 1 PM ___ Company, 2:30 PM

Dancer Name: _____ Birthday: _____ Age (as of 7/29): _____ Height: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Cell Phone: _____ E-mail*: _____

Parents / Guardian Names: _____

School and Grade for 2019/20 Season: _____

Classes Currently Attending (Number of Hours per Week) at Studio: _____

_____ Ballet, Teacher _____ Pointe, Teacher _____ Modern, Teacher _____

_____ Jazz, Teacher _____ Tap, Teacher _____ Pas de Deux, Teacher _____

_____ Other with Teacher(s) _____

Years of Training: _____ Ballet _____ Pointe _____ Modern _____ Jazz _____ Tap
_____ Pas de Deux _____ Other _____

Performing Experience:

Please list any activities in school or community which may conflict with rehearsals or performances (choir, orchestra, work, etc. – be as specific as possible):

I am interested in performing with San Antonio Metropolitan Ballet because:

Comments: (Anything you would like us to know about you)

Please initial:

_____ I/My Dancer am/is available to attend both weeks of Summer Dance 2019 – July 29-August 11 when season choreography and master classes will take place.

_____ I understand the season runs from July 1 through June 30 with two main productions, one summer intensive, and additional performing opportunities.

_____ I am not currently committed to another dance company this season (2019/20).

I understand that San Antonio Metropolitan Ballet (SAMB) auditions are free of charge, the company primarily rehearses on weekends, and by auditioning, I declare that I am interested in committing to SAMB for the season. I understand that pending acceptance in to SAMB, there will be additional costs, rehearsals, performances, commitments and rules that I will support. *Please include the email that will be used for all company communication.

Signature of Parent/Guardian (if dancer is under 18)

Date