



IN MOTION
DANCE



All dancers must bring this form and \$10 /\$15 per family (payable to In Motion Dance) to their audition; dancers will be unable to audition without them. All dancers must have a zero balance on their account to audition. Please contact Miss Jessica at: jwielondek@yahoo.com with any questions. **ALL dancers must attend the audition on Friday, July 27th 5:30-7:30**

Student's Full Name: _____ Phone Number: _____

Home Address: _____

Dancer's Birthdate: _____ Dancer's Age: _____ 2018-2019 School Grade: _____

Parent's Email Address: _____

Dance Training

Style	# of Years of Training	Studio Name
Ballet	_____	_____
Tap	_____	_____
Jazz	_____	_____
Other	_____	_____

Additional paper may be used to answer these questions.

Please list any other additional dance experience you have (i.e.: school teams, musicals, etc.)

Why do you want to be a member of IMD's Dance Company? Please be specific

Why is dance important to you?

What are your dance goals for the 2018-2019 season and how will you achieve them?

IMD Dance Company Guidelines

As a member of IMD's Dance Company I agree to the following:

I am aware that being a member of IMD's Dance Company requires 60-90 minutes of company class plus an additional technique class (Thrive, Artistic, Refined)

Dancer's Initials _____

I am committed to being a dedicated dancer to In Motion Dance studio and the Dance Company and will make additional rehearsals, performances, and events a priority.

Dancer's Initials _____

I will be respectful to my fellow dancers and instructors. I will be a responsible and supportive member of In Motion Dance studio and the Dance Company.

Dancer's Initials _____

I give my permission for my dancer to participate in the 2018-2019 In Motion Dance Dance Company auditions. I agree to pay my tuition and costume balances on their due date or make payment arrangements prior to their due date. I understand that there will be additional costs, rehearsals, performances, and commitments that I will support my dancer in abiding by.

Parent Name: _____

Parent Signature: _____

Date: _____

New students to the studio must submit a signed waiver – available to download on our website:
dancinginmotion.com

Audition Number _____

Check Number _____