

Audition Date: _____

Audition City: _____



Audition Number:
(Walnut Hill Use Only)

AUDITION FORM

Auditioning for (check all that apply): Summer Youth Dance Summer Dance Dance Department

Residential status: Day Student Boarding Student

Name: _____ Gender: _____

Date of birth: _____ Current age: _____ Grade next fall: _____

Current dance school: _____ Years of ballet training: _____ Years of pointe training: _____

Have you auditioned for Walnut Hill before today (circle one)? No Yes If yes, when? _____

If previously accepted, what was your most recent level placement? _____

If previously accepted, what year(s) did you attend? _____

How did you hear about this audition? Poster Magazine Website Dance Teacher Word of Mouth

NOTE: All audition results will be emailed. Please provide valid email address and print legibly

Home Address: _____ City: _____ State: _____ Zip: _____

Parent(s)/Guardian(s) Name: _____

Parent(s)/Guardian(s) Email: _____

Parent(s)/Guardian(s) Telephone #: _____

Student's Email: _____ Audition Fee: Cash _____ Check # _____

FOR ADMINISTRATIVE USE ONLY

SUMMER YOUTH DANCE / SUMMER DANCE

DANCE DEPARTMENT

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Evaluation done by: _____