



American Academy of Ballet

Founding Director: Mignon Furman

2018 Audition Form

PLEASE PRINT CLEARLY

Date: \_\_\_\_\_ Audition City: \_\_\_\_\_

Dancer

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country \_\_\_\_\_

Dancer's Telephone: (Area Code) \_\_\_\_\_ (Number) \_\_\_\_\_

Email for audition result: [grid]

Male Female

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

Date of Birth: \_\_\_\_\_

Parent/Guardian

Father/Guardian

Mother/Guardian

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

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

Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Dance Training

Teacher's Name: \_\_\_\_\_ Ballet School: \_\_\_\_\_

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

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone : (Area Code) \_\_\_\_\_ (Number) \_\_\_\_\_

Teacher's Email [grid]

Table with 3 columns: Dance Style, Years Studied, Classes per week. Rows include Ballet, Pointe, and Other forms of dance studied (Jazz, Modern, Tap, Lyrical, Hip-Hop, Contemporary, Character).

PLEASE TURN OVER

**Previous Summer School Attended**

Name of Program

Location

Year Attended

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**How many weeks are you interested in attending Summer School?**

This is **NOT BINDING**; it is only to give us a **Preliminary** idea.

Your answers will in no way affect your acceptance to Summer School.

- 1 week     2 weeks     3 weeks     4 weeks     5 weeks     6 weeks

Would you be coming as a

- Residential Student     Day Student

**You will be notified WITHIN 2 WEEKS regarding your acceptance for Summer School.**

**How did you hear of the American Academy of Ballet?**

Please check **ALL** that apply.

- From my teacher  
 From a friend/relative  
 Attended AAB previously \_\_\_\_\_(year/s)  
 AAB Poster  
 AAB Summer School Brochure  
 Facebook  
 Google  
 AAB Website  
 Magazine Name: \_\_\_\_\_

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