

AUDITION - TRIAL Form

STUDENT INFORMATION		<input type="checkbox"/> New	<input type="checkbox"/> Returning
First Name:		Last Name:	
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		Birthdate: / /	Age:
PARENT INFORMATION			
Parent/Guardian Name:		Email Address:	
RELEASE OF LIABILITY			
<p>The above listed student has permission to participate in lessons at IBA for a trial, audition or placement. For <i>Dance With Me Trials</i>, I sign below assuming my own responsibility for my own participation with my child's in this trial.</p> <p>Signature: _____ Date: / /</p>			
(For Office Use Only)			
Lesson:		Date: / /	
PAYMENT RECORD			
Audition Fee	Payment Amount	Date Paid	Payment Type
\$40.00	\$	/ /	<input type="checkbox"/> Cash <input type="checkbox"/> Check # <input type="checkbox"/> CC #

We thank you for visiting the International Ballet Academy. We will follow up with you about the instructor's feedback as soon as possible. Please be aware that it could take a few business days for this process. This form and the fee are due at the time of participation. Please arrive approximately 30 minutes beforehand and be prepared to dance at your designated time after check-in at the front desk.

DANCE HISTORY & TRAINING	
Current/Previous Dance School (Include City/State):	Years of Dance Training:
Types of Dance in Years:	
Ballet:	Tap:
Theatre:	Modern:
Jazz:	
Other Relative Training:	

Instructor's Observations: _____

RECOMMENDATIONS about ballet level with IBA and/or levels for other areas/genres of dance:
