



Audition Application 2019

I am auditioning for the:

BBT Main Program
ages 12 + up, pre-professional

The Choreographic Project
ages 15 + up, with choreographic experience

Intermediate Program
ages 10 – 12, intermediate level, no pointe work

The Edinburgh Connection
requires 4 weeks in VT and 2 weeks abroad
**see questions below*

Please print clearly. This information is needed to contact you after the audition.

Date: _____ City/Studio of Audition: _____

Dancer's Name: _____ Age at Audition: _____

DOB: _____ Sex: _____ # Years Serious Training: _____ #Hrs Dance Per Week: _____

Pointe: **Y** or **N** How long?: _____ Present Ballet School: _____

Home Address: _____ City: _____

State: _____ Zip: _____ How did you hear about us? _____

Dancer's Email: _____ Dancer's Cell: _____

Parent Name: _____

Parent Email: _____ Parent Cell: _____

I, the parent or legal guardian of the aforesaid student, agree on behalf of myself and said student not to hold Burklyn Ballet Theatre Inc., or the studio in which Burklyn Ballet Theatre holds its audition, the directors, faculty members or employees of either, liable for injuries or illness contracted while auditioning for Burklyn Ballet Theatre, The Intermediate Program, the Edinburgh Connection, and/or the Choreographic Project. I grant permission to Burklyn Ballet Theatre to use and display any photographs of this audition for commercial or non-commercial use. I also grant permission to Angela Whitehill, Founding Artistic Director of Burklyn Ballet Theatre, to use and display any photographs in any future publication, videos or books she might write.

Dancer: Sign & Date: _____

Parent: Sign & Date: _____

or responsible adult if parent is not with student at the audition) Relationship: _____

Do not write in this area. For BBT use only.

Number: _____

Payment: \$30 CASH or CK# _____

ACCEPT: Yes No

Program: BBT INT TCP EC

Scholarship: \$500 \$250 \$100 \$150

Alternate Scholarship: Yes \$_____ No

Performing Ability: Excellent Good Fair

Technique: 1 2 3 4 5 6 7 8 9 10

Pointe Work: 1 2 3 4 5 6 7 8 9 10

Men's Technique: 1 2 3 4 5 6 7 8 9 10

Additional Comments:

Send counselor information: YES NO

Send junior counselor information: YES NO

***Edinburgh Connection** Please complete if interested in this opportunity:

1.) Do you have a passport? _____ 2.) Have you flown on a plane? _____ 3.) Do you think your parents would like to chaperone? _____

4.) How would you feel if they were to chaperone? _____ 5.) Have you ever performed everyday for a week? _____