Audition Application 2027

I am auditioning for the:

☐ **BBT Main Program**
ages 12 + up, pre-professional

☐ **Young Men's Program**
ages 10 – 14, intermediate level

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

☐ **The Choreographic Project**
ages 15 + up, with choreographic experience

☐ **Intermediate II Program**
ages 12 – 14, intermediate level, Pointe not required

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:_____Preferred Gender Pronoun: _____# 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: CASH or CK#_____

ACCEPT: Yes No

Program: BBT INT2 INT YM TCP

Scholarship: $500 $250
$200 $150
$100

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

Mailing Address: P.O. Box 302 | Johnson, VT 05656 | 1.877.287.5596 | burklynballet.com