

Los Angeles BALLET ACADEMY

2021 SUMMER DANCE INTENSIVE AUDITION APPLICATION July 12 – August 6, 2021

DANCER'S NAME		DOB_		_AGE
PARENT'S NAME				
ADDRESS				
TEL-HOME	CELL	WORK_		
EMAIL				
I am interested in attendin ()Week 1 (7/12-7/16) (g:)Week 2 (7/19-223) ()	Week 3 (7/26-30)()V	Veek 4 (8/2-8/6)	
Current grade in school	Academic school curre	ntly attending		
Number of years of dance	Studio which Studen	t currently dances		
Is Student on Pointe?	_ If yes, when did Student g	go on pointe? Month	Year_	
Does your Student have a	ny physical limitations or a	llergies that we should	know about?	
Parent/Guardian's Signatu	ire		Date	e
	t this form with your video a adit Card over the phone is		use contact the LA	ABA office to pay the au

FOR OFFICE USE ONLY PAID

Notes: