

Define Competition Team Dancer Application

Dancer Name: _____ Birthdate: _____ Age: _____

Mother Name: _____ Father Name: _____

Home Phone: _____ Dancer's Cell Phone: _____ Text: Y N

Mom Cell: _____ Text: Y N Dad Cell: _____ Text: Y N

Contact Email: _____

Technical Background

Please indicate in what areas you have had technical instruction & number of years or months.

Ballet # of years/months studied _____

Jazz # of years/months studied _____

Hip Hop # of years/months studied _____

Team Commitment

How many groups can you commit to _____

Are you interested in a solo (must commit to 4 groups to be eligible) YES NO

If Selected, would you be open to a duo or trio (circle one) YES NO

Parent Signature: _____

Dancer Signature: _____

Parental Support

Dear Parents: As with anything that our children are involved in, de•fine/ dance space's Competition Team is only as good as the support structure around us. Please check below areas in which your family can help facilitate our best season.

___ Team Parent: Leadership role that helps to coordinate snacks, food, carpools, etc.

___ Non-profit Work: Leadership role that is responsible to coordinate fundraising efforts that may include a car wash, Chick-Fil-A Night, See's Candy, Clothing Recycling, Applebee's, etc.

___ Team Party Committee: Member will help coordinate team parties and other special events.

___ Year-End Banquet Committee: Member will help coordinate year end event including venue, food, etc.

___ Props (Construction)

___ Props (competition delivery, set-up)

Dancer Questionnaire

What other activities, sports, or jobs are you currently involved with, or are planning to be involved with during the competition dance season?

What are three (3) words that describe you?

1. _____
2. _____
3. _____