



For Joffrey Staff Use Only
Audition #

CAMP JOFFREY APPLICATION FORM

Please complete this form and bring it with you to the interview on May 16.

Personal Information

Student Name _____
First Name Middle Name Last Name

Date of Birth _____ Age _____
(MM/DD/YYYY)

Student cell phone # _____ Home phone # _____

Address _____
Street City State Zip Code

Parent/guardian name _____

Parent/guardian e-mail _____

Circle One: Leotard Size: S M L XL Pant Size: S M L XL T-Shirt: S M L XL Street Shoe Size _____
(Adult sizes)

Emergency Contact Information

Emergency contact name _____

Emergency phone # _____
Circle one: Cell phone work phone home phone

Relationship to you _____

Student Questions

Have you taken any dance classes? ___yes ___no For how long have you been taking dance classes? _____

What is your favorite style of dance? _____

Have you performed in front of an audience? ___yes ___no

Why is it important to respect adults? _____

Do you work well with other students? Why? _____

What do you hope to learn by the end of the program? _____