

2008-2009 Audition Registration Form

Please print clearly in dark ink and submit completed with your photo, letter, resume, and application fee of \$25 (Cash or check payable to "SF Conservatory of Dance").

Student's Name _____ Citizenship _____

I am auditioning for the 2008 Summer Intensive Program
Preference (in numerical order): Session 1: June 2 - July 12 (6 weeks) **Note:** must be 18 years or older
 Session 2: June 16 - July 12 (4 weeks)
 Session 3: July 14 - August 9 (4 weeks) Naharin Curriculum
Summer Housing: University of San Francisco Dormitory Alternate Housing (must be 18+)
 Address: _____

I am auditioning for the 2008-2009 Spring/Fall Semester Which: _____

Student's Date of Birth: ____/____/____ Age: ____ Grade/Level in Academic School: _____
Current Dance School: _____ Current Academic School: _____
Other Dance Schools Attended: _____

STUDENT Contact Information: MAILING Address, City, State & Zip

Permanent address _____
Current address _____
Home Phone #: (____) _____ Student's e-mail address #1: : _____
Cell Phone #: (____) _____ Student's e-mail address #2: _____

MOTHER/Guardian Name: _____

Permanent address _____
Home Phone #: (____) _____ Mother's e-mail address: _____
Cell Phone #: (____) _____ Work e-mail address: _____
Work Phone #: (____) _____ Employer Phone #: (____) _____
Occupation: _____ Employer Name: _____

FATHER/Guardian Name: _____

Permanent address _____
Home Phone #: (____) _____ Father's e-mail address: _____
Cell Phone #: (____) _____ Work e-mail address: _____
Work Phone #: (____) _____ Employer Phone #: (____) _____
Occupation: _____ Employer Name: _____

Alternative Emergency Contact Information (other than Parents/Guardians)

Name: _____ Relationship to student: _____
Home phone #: (____) _____ Work/cell phone #: (____) _____
Address: _____

The San Francisco Conservatory of Dance is committed to enrolling a student body that is ethnically diverse. This information is voluntary and will be used for statistical purposes only. Please check one:

- | | | |
|---|---|---|
| <input type="checkbox"/> Asian | <input type="checkbox"/> Alaskan Native | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> American Indian | <input type="checkbox"/> Hispanic | <input type="checkbox"/> Caucasian |
| <input type="checkbox"/> African American | <input type="checkbox"/> Filipino | <input type="checkbox"/> Other: _____ |
| | | <input type="checkbox"/> Decline to state |

Photo/Video Release for School Promotional Use Only:

I hereby give my permission to the San Francisco Conservatory of Dance to photograph and/or videotape me during dance classes, rehearsals and/or performances for the school's promotional use.

Student Signature: _____ Date: ____/____/____
Parent Signature (if student is under 18) _____ Date: ____/____/____