

**2011 Audition Registration Form**

Please print clearly in dark ink and submit completed with your head photo, letter, resume, and application fee of \$30 (cash or check payable to **SF Conservatory of Dance**).

Student's Name \_\_\_\_\_ Citizenship \_\_\_\_\_

I am auditioning for the 2010 Summer Intensive Program

Please indicate session preference:  Session 1: May 30 - July 9 (6 weeks) Note: must be 18 years or older  
(in numerical order)  Session 2: June 13 - July 9 (4 weeks)  
 Session 3: July 11 - August 6 (4 weeks)

Summer Housing:  University of San Francisco Dormitory  Alternate Housing  
 Address: \_\_\_\_\_

I am auditioning for the 2011 Spring Semester (January 5 - May 14, 2011)

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

**STUDENT INFORMATION** (please provide street addresses, cities, states & zip codes)

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: \_\_\_\_\_

**Alternate Emergency Contact Information (ie. other than Parents/Guardians)**

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_  
Phone #: (\_\_\_\_) \_\_\_\_\_ Work/cell phone #: (\_\_\_\_) \_\_\_\_\_  
Address: \_\_\_\_\_

The S.F. Conservatory of Dance is committed to enrolling a student body that is racially and ethnically diverse. Should you voluntarily provide the following information, it will be used for statistical purposes only. Please check whichever apply.

- |   |   |   |
|---|---|---|
| <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 the SF Conservatory of Dance my permission to use for the school's promotional purposes any photos and/or video clips in which I (or my child) may appear, taken during dance classes, rehearsals and/or performances.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent Signature (if student is under 18) \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_