Audition #		
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BATON ROUGE BALLET THEATRE 2024-2025 YOUTH BALLET AUDITION FORM Dancers must be entering 5th-9th grade in the fall of 2024

Audition Fee: \$10

Name						
Last		First		Middle		
Address		N5 '1' /'	C 1: CC			
Street		Mailing (if different)				
City		State		Zip		
Dancer's Email Address	S		Γ-shirt size (c	ircle one) YM YL AS AM AL AXL		
Home Telephone		Dancer's Cell				
Mother's Name		Father's Name				
Mother's Cell		Father's Cell				
Parents' Address if diffe	erent from above					
Parents' Email Address						
Age (at time of audition	Birth Date _		_Height	Weight		
School						
	Name (other than parent)					
				Home Phone/ Cell		
	years of training					
Do you attend 3 ballet c	lasses a week?	Are you willing	to attend 3 b	allet classes a week?		
Have you ever been in '	BRBT Youth Ballet"?	Numbe	er of years			
Workshop Fri. Ma from 4:30-6:30;	ny 3 from 4:30-6:30; Sat. May FuesFri. May 28-31 from 9-12 latory attendance required for be double cast, and da	4 & 11 from 11:15-2; 2. Absences and conflir rehearsals May 28-3 ancers may not dance	Sat. May 18 cts should be 1 from 9-12 a every day of			
2. Youth Ballet fee of S Youth Ballet Chored assessed if fee deadl		health insurance card the remaining \$125 du Sets, T-Shirt, Party, C). Parent me e by May 18 Costume, Dir	eting: May 3 at 4:30). This fee includes vector. <u>A \$10 late fee will be</u>		
4. Purchase of 2024-2 5 By signing below, I ack		ed. This is an addition bove, and if asked to jo	ial fee when s in the BRBT			
Dancer S	Signature		D	ate		
Parent or Gu	ardian Signature		Ε	Date		