

EXCALIBUR TROUPE ~ 2018/19 AUDITION FORM

Please complete and return at time of audition

Student Name	
Birth Date	
Age as of Jan 1 st , 2019	
Student Email	
Student Cell Number	
Parent Name	
Parent Email Address	
Parent Contact Number	
Emerg. Contact & Number	

HOW MANY YEARS OF TRAINING HAVE YOU HAD?

Ballet	
Pointe	
Hip Hop	
Jazz	
Modern	
Tap	
Lyrical	
Acrodance	
Broadway	
Highland	

A FEW QUESTIONS FOR THE DANCER

Are you willing to commit to the entire season?	
What is your greatest strength as a dancer?	
What is your greatest weakness as a dancer?	
Why would you like to be considered for entry into the Excalibur Troupe Program?	
How did you improve as a dancer this year?	
Describe what having loyalty towards your team means?	
If you miss 3 or more troupe classes(not due to illness) What do you think should happen?	

A FEW QUESTIONS FOR THE PARENT

Why would you like your child to be considered for entry/re-entry into the Excalibur Troupe Program?	
Describe what having loyalty towards your team means?	
If your child misses 3 or more troupe classes (not due to illness) What do you think should happen?	