

2019-2020 THS Dance Team and All-Male Application

PLEASE PRINT CLEARLY

(The following personal information will only be used to add to our team roster if you make the team)

Name: _____ Current School: _____

Current Grade (*Circle One*) 8th 9th 10th 11th Date of Birth: _____

Parent Name(s): _____

Address: _____ Apt #: _____

City: _____ State: _____ Zip Code: _____

Student Phone #: (____) _____ Parent Phone #: (____) _____

Student Email: _____

Parent Email: _____

If you make the team, are you also planning on being involved in another sport and/or program?

MUN ASB T-TECH SPORT _____

Is there another activity (besides what's listed above) that you are involved in that may conflict with Dance Team or All-Male practices? _____

How did you hear about auditions?

Why do you want to be on the Team?

List all of your dance experience, if any:

What is your favorite dance style & why? Or what style are you most excited to learn? _____

Can you do any dance, gymnastics or Break-Dancing tricks? If so, what are they?

What is your current GPA?

Are you aware of how much of a time commitment our program is? If you make the team, what steps will you take to prepare to balance school, the team and other responsibilities? _____

Do you have any health issues? (Asthma, heart problems, etc):

Is there anything else you think the coaches and judging panel need to know about you?
