iDANCE COMPANY APPLICATION

First Name: _____ Last Name: _____DOB: _____

School: _____ Grade: _____ School Release Time: _____

Parent Name: _____ Parent Phone #: _____

Email Address: _____ Additional Emails: _____

Dance Experience: _____

_____

Studio during '24 - '25 Dance Season: _____ Company or Rec: _____

Favorite style of dance: _____

What are your strentghs AND weaknesses as a dancer? _____

_____

_____

_____

Why do you want to be a part of iDance Company? _____

_____

_____

_____

What goals do you have for the upcoming dance season? _____

_____

_____

Please list any other activities that you will be involved in during the '25 - '26 dance season:

_____

_____

- For Parent To Complete -

Company dancers are guaranteed TWO routines to compete throughout the season. All dancers can be considered for additional routines. Please keep in mind choreogrpahy, costume, and competition entry fees when deciding how many routines you'd like your dancer considered for. These are simply requests, and nothing beyond TWO are guaranteed. Dancers will be placed in additional routines at the director's and/or choreographer's discretion.

I am comfortable with my dancer being considered for the following amount of group dances: _____

I, _____, give my child permission to audition and potentially be accepted into iDance Company for the 2025 - 2026 season.

_____ _____

Parent Signature Date