

Complete this form and bring it to your audition on Friday, May 19th along with a headshot photo.

Name:		
Age/Birthday		Height:
Email:		
Phone:	Upcoming School Grade:	
Circle the Team(s) You Are Auditioning For: *All Dancers will be placed on a team suited to their ability		
UDA TEAM Company	UDA Premiere Company	UDA Elite Company
**** Premiere Company ONLY Circle At Least One Add-On Class		
*Acro, Cheer and Hip Hop Require Additional Costume and Performance Fees		
Tumbling	Ballet	*Hip Hop
Stretch/Strength	Тар	*Acro
Turns/Leaps/Technique		*Cheer
I PLAN TO THE IN PERSON No. **PREFERRED	19th <u>=</u>	I PLAN TO SUBMIT A VIDEO AUDTION

TRYOUT NUMBER:FEE PAID

\$15

For Office Use Only

Notes: