

Dancer Information

Level applying for: Performing Member _____ Trainee Member _____

Dancer's Name _____ Age _____

Address _____

Phone Number _____ Birthday _____ Email Address _____

Height _____ Weight _____ T Shirt Size: Youth – M L
Adult – S M L XL XXL

Allergies or Medical Conditions _____

Prior to this year: Prior to this year:
Number of Years of Classical Ballet _____ Number of Years in Ballet Arts _____

Number of Ballet/Pointe Classes Last Year _____ Previous Ballet Arts Level _____

Previous Roll: *Nutcracker (2006)* _____
Nutcracker (2005) _____
Nutcracker (2004) _____
Nutcracker (2003) _____
Nutcracker (2002) _____
Nutcracker (2001) _____
Nutcracker (2000) _____
Beatrix Potter (2007) _____
Sweet Lips Suite (2007) _____
Classical Fantasy (2007) _____
Coppélia (2006) _____
Dorothy in the Emerald City (2005) _____
Cinderella (2004) _____
Alice in Wonderland (2003) _____
Sleeping Beauty (2002) _____
Beatrix Potter (2001) _____

School _____ Grade _____

School Address _____ Principal _____

Church _____

Church Address _____

Contact (other than parent) in an emergency _____

Phone Number _____ Relationship _____

Insurance Name _____ Group/Policy Number _____

Father: Name _____ S.S. # _____ Cell # _____

Place of Occupation _____ Work Phone Number _____

Mother: Name _____ S.S.# _____ Cell # _____

Place of Occupation _____ Work Phone Number _____

Parents' Email Address(es) _____

Paternal Grandparents: Name _____

Address _____

Maternal Grandparents: Name _____

Address _____

Areas parents can help with:

- | | | |
|--|---------------------------------------|---|
| <input type="checkbox"/> costumes | <input type="checkbox"/> telephoning | <input type="checkbox"/> publicity |
| <input type="checkbox"/> ticket sales | <input type="checkbox"/> Café Ballet | <input type="checkbox"/> props/sets |
| <input type="checkbox"/> ushering | <input type="checkbox"/> hospitality | <input type="checkbox"/> cast party |
| <input type="checkbox"/> sweet shop/boutique | <input type="checkbox"/> fund raising | <input type="checkbox"/> studio overnight |
| <input type="checkbox"/> truck for moving sets | <input type="checkbox"/> tea party | <input type="checkbox"/> grants |
| <input type="checkbox"/> Make a Difference Day | | <input type="checkbox"/> school performance |

Do you have a family member or contact for donations or in-kind support? If so, who?

Newspapers/newsletters **in West Tennessee ONLY** you would like to have Ballet Arts announcements sent to (names and addresses). (This list will be used to generate publicity photos on company photo day.)

I give my consent to allow my child to dance with Ballet Arts, Inc. I understand that my child's picture will be on the Ballet Arts' website but without name recognition. I also give my permission to authorize treatment for my child in case of an emergency. Furthermore, I hereby waive any claim against Ballet Arts, Inc., its Board of Directors, its agents, or the dancing school where company classes or rehearsals are given in the event of any injuries incurred during rehearsals, performances, company classes, or any Ballet Arts, Inc. activity.

Signature of Parent _____ Date _____

Level Assigned: Performing Member _____ Trainee Member _____