

Audition Support Day

24th November 2024

Personal details:

Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Present Dance School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Principal\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Classical Ballet working standard\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of parent/guardian if under 18\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home tel. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Do you have a disability that may require assistance Yes/No

Please note, confirmation will be sent to this email address

Please check spam especially if you have hotmail. Fee is non refundable

Nationality \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender Male/Female/non-binary

Date of birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age on date of course \_\_\_\_\_\_\_\_\_\_\_

£35 to be paid online using ref:

Aud Sup with applicant’s surname:

Laine Theatre Arts

A/C 62138081 S/C 60 11 17

Scan completed form to:

lorrainebullivant@laine-theatre-arts.co.uk