

# TDA COMPANY AUDITION APPLICATION

NAME \_\_\_\_\_

AGE GROUP – CIRCLE ONE

4-6 years

7-9 years

10-12 years

13-18 years

AGE \_\_\_\_\_ BIRTHDAY \_\_\_\_\_ T-SHIRT SIZE \_\_\_\_\_

GRADE YOU WILL BE IN NEXT FALL \_\_\_\_\_

SCHOOL YOU WILL ATTEND NEXT FALL \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIPCODE \_\_\_\_\_

BEST CONTACT PHONE NUMBER \_\_\_\_\_

PARENT EMAILS WHERE WE CAN CONTACT YOU

\_\_\_\_\_

\_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ CELL PHONE \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ CELL PHONE \_\_\_\_\_

LIST ANY EXTRA CURRICULAR ACTIVITIES YOU WILL BE INVOLVED IN  
NEXT YEAR: \_\_\_\_\_

LIST ANY DANCE/GYMNASTICS TRAINING YOU HAVE HAD AND WHERE  
YOU HAVE STUDIED IT: \_\_\_\_\_

\_\_\_\_\_

WHY DO YOU WANT TO BE ON A TDA COMPANY?

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