



COLORADO BALLET ACADEMY

Pre Professional Audition Registration

Return in person, mail, email, or by fax to Colorado Ballet
Attachments: (1) Fee, (2) Photo of 1st Arabesque

Today's Date: _____ **Are you currently enrolled at Colorado Ballet?** **Yes** **No**

First Name: _____ **Last Name:** _____

Date of Birth: _____ **Age:** _____ **Contact E-Mail:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Home phone: _____ **Cell phone:** _____

Current ballet instructor: _____ **Current ballet school:** _____

Parent/Guardian's Name: _____ **Contact Phone:** _____

When are you hoping to start the Pre Professional Program? _____

Are you currently in high school? _____ **When is your anticipated graduation date?** _____

If accepted to the program what school are you planning to attend for your academics? _____

If accepted will you need assistance arranging housing? _____

Number of ballet classes per week: _____ **Number of pointe classes per week (if applicable):** _____ **Height:** _____

How long has student been on pointe: _____ **How did you hear about us:** _____

Describe the applicant's dance experience: _____

List previously attended summer programs with years attended: _____

What about Colorado Ballet's Pre Professional Program interests you? _____

Have you participated in any other Pre Professional training programs? If so please indicate where.

Application Requirements: All applicants must submit an application form, (1) 5"x7" high-quality photograph in 1st arabesque on pointe and (2) Audition fee of \$25 application fee and \$45 if applying by video; please make checks payable to Colorado Ballet Academy.

Waiver:

By signing up for Auditions with Colorado Ballet Academy and Colorado Ballet (hereinafter referred to collectively as Colorado Ballet), I and my family agree to observe and obey all posted rules and warning and further agree to follow any instructions or direction given to me by my instructors or the employees, representatives or agents of Colorado Ballet.

I recognize that there are certain inherent risks associated with Ballet and other forms of Dance and I assume full responsibility for any injury to myself that may occur while receiving training with Colorado Ballet and further release Colorado Ballet and its employees, representatives or agents for any injury, loss or damage arising from my use of the facilities whether caused by the fault of myself, my family, Colorado Ballet or other affiliated parties.

I agree to indemnify and defend Colorado Ballet against all claims, causes of action, damages, judgments, costs or expense, including attorney fees and other litigation costs, which may in way arise from my or my family's use or training at Colorado Ballet.

By signing, I have read and agreed to the above waiver and policies.

Student Name (please print): _____

Student/Guardian Signature: _____ **Date:** _____

FOR STAFF USE ONLY

1.....2.....3.....4.....5

COMMENTS: _____

