



ENDEAVOR SCHOOL OF THE ARTS PERFORMANCE TEAM APPLICATION

DANCER INFORMATION:

NAME _____ BIRTHDATE _____
CURRENT AGE _____ PERFORMANCE AGE (AS OF 1/1/22) _____ GRADE IN 21-22 _____
DANCER EMAIL: _____ DANCER CELL: _____

PARENT INFORMATION:

MOM NAME _____ MOM CELL _____
DAD NAME _____ DAD CELL _____
PARENT EMAIL _____
ADDRESS _____
CITY _____ ZIP _____ HOME PHONE # _____

PLEASE CHECK THE DANCE STYLES STUDENT IS CURRENTLY STUDYING:

_____ BALLET _____ TAP _____ JAZZ _____ LYRICAL _____ HIP HOP _____ CONTEMPORARY
_____ OTHER: _____

I AM INTERESTED IN PARTICIPATING IN:

_____	MINI COMPETITIVE TEAM	_____	PETITE PERFORMANCE TEAM
_____	PETITE COMPETITIVE TEAM	_____	PERFORMING GROUP

I HAVE READ THE TEAM EXPECTATIONS AND REQUIREMENTS AND FULLY UNDERSTAND THE
COMMITMENT REQUIRED TO BE A PART OF THE TEAM.

PARENT SIGNATURE _____ DATE _____

DANCER SIGNATURE _____ DATE _____