

Date of Form Submission: _____

Date of Audition: _____ Time: _____



Goh Ballet Academy Audition/Assessment Form

**All fields are mandatory*

***If the prospective student is auditioning via video – please send a \$50 (GST inclusive) cheque or money order in Canadian funds payable to Goh Ballet Inc. in order to have your audition processed.*

****If your audition or assessment is in person (group/private), please confirm costs with the Administrative Office*

Name of Student: _____ Nationality: _____
First Last

Date of Birth: ____/____/____ Current Age of Student: _____
MM DD YYYY

Gender: Male Female Height: _____cm Weight: _____lbs

Email Address: _____

Address: _____

Contact Name: _____ Relation to Student: _____

Home Phone: (____) _____ Mobile Phone: (____) _____

Please select which program(s) you are interested in (check all that apply):

- Goh Ballet Annual Training Programs
 - *Goh Ballet Youth Company Program
 - Senior Professional School (Combined Academic/Ballet Program)
 - Junior School Program
 - Intermediate Division
 - Pre-Professional Division
- International Summer Intensive Program

***Should the prospective student wish to be considered for the Goh Ballet Youth Company, a [Youth Company Audition Registration Package](#) must be filled out and submitted to the Administrative Office.**

Home Stay Required? (Yes/ No)

Years of Ballet Experience: _____ Last Exam Passed: _____

Female: Is the student training on pointe? If so, how many years? _____

Any siblings enrolled with Goh Ballet for 2019/2020? (Yes/No) Name: _____

Name of Current or Last Dance School: _____

How did you hear of the audition? _____

Is there anything you would like to tell us about yourself?

OFFICE USE ONLY

ARTISITC STAFF ASSIGNED TO AUDITION: _____ Video IN PERSON

AMOUNT PAID _____ METHOD _____ RECOMMENDED LEVEL _____

FOLLOW UP DATE _____ ENROLLED DECLINED _____

NOTES _____