| Staff Only:      | \$50 Fee: |
|------------------|-----------|
| Signed Policies: |           |

## WEST MICHIGAN ELITE POM AND DANCE AUDITION APPLICATION

| Dancer Name:  |  | DOB:   |  |  |
|---|--|--|--|--|
| Parent Name:  | Cell #   |  |  |  |
|   |  |  | Text? Y / N  |  |
| FOR TEAM PLACEN<br>LIKE TO BE A PART  |  | ASE WRITE IN THE NUME  | BER OF DANCES YOU WOULD  |  |
| Group Dance   | Duo/Trio Da  | ance Solo D  | Pance  |  |
| ·   | Pom Pom Ballet Acro  | Contemporary   | Musical Theater  |  |
| their duo/trio partn  |  | ong, their costume, or th  | s to select their team placement,<br>neir instructor. We place dancers   |  |
|   | quired to take all techi<br>ap for 2+ years and are  | •  | and jazz. tap may be optional  |  |
| Are you interested  | d in being in a Tap Ro   | outine? GROUP / SOI  | LO / DUO / TRIO / NO   |  |
| YES / NO *This person will learn another dancer cannot  |  | 's part in the dance, and only oase a costume, you only pay fo   | compete if something happens where<br>or competitions you perform in, tuition  |  |
| BE PAYING THIS SEDANCER IS ALLOWED FOR THE NUMBER TO THESE DANCE STUDENT DROP COMMITMENT IS UREAD AND AGREE THAT I AM UNDER | EASON AND HAVE APPOSED TO PARTICIPATE OF DANCES I HAVE ASSESSED FOR THE 2023-202FEE IF WE CHOOSE P. I UNDERSTAND THAT D TO THE 2023-2024 W | PROVED THE CORRECT MIN. I AGREE TO PAY THE APPROVED IN THE ABOVE AS SEASON. AND I UNIT TO WITHDRAW FROM AT TUITION AND FEES AS WITH COMPETITION TEAM | ERSTAND THE AMOUNT I WILL NUMBER OF DANCES THAT MY IE 2023-2024 SEASON TUITION IE SECTION. I AM COMMITTING DERSTAND THAT THERE IS A ITHE SEASON BEFORE MY RE NON-REFUNDABLE. I HAVE I POLICIES AND UNDERSTAND ES MY CHILD WILL BE IN. MY |  |
| Parent Signature  |  |  | Date: / /  |  |