



Audition Application Form

Academy of
Dance & Movement

DATE: / /2007

SURNAME: _____ FIRST NAME: _____
HOME OR POSTAL ADDRESS: _____
SUBURB: _____ STATE: _____ POSTCODE: _____
PHONE: () _____ MOBILE / DAYTIME NUMBER: _____
EMAIL: _____
DOB: _____ MALE FEMALE AGE AS AT JUNE 30 2007: _____

Nationality: _____
Height: _____
Academic Education currently undertaking: _____
If secondary level achieved state what level and year: Academic level: _____ Year of completion: _____

History of Dance Training:

SIGNATURE OF APPLICANT: _____ DATE: _____
NAME OF PARENT/LEGAL GUARDIAN: _____
(If student under 18 yrs)
SIGNATURE: _____ DATE: _____

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PAYMENT DETAILS TO BE COMPLETED:

ATTACH A CHEQUE MADE PAYABLE TO ACADEMY OF DANCE & MOVEMENT
(Please write students name on the back of cheque- Thank you)

Pay by June 22nd to receive the Early bird rate: \$15
Applications received after June 22 are charged at the standard fee: \$25

How did you hear about the ADM Full Time Course?

- Dance School Dance Magazine / Newspaper ADM Website ADM Mail out
 VCE & Career Expo Other