



Signature Dance Company

Nutcracker Registration Form 2017



Audition Number: _____

Name _____	Birthdate _____
Email _____	School Grade _____
Phone _____	Cell _____
Address _____	
CPD Student _____	Y/N _____
	If not, where? _____
What dance classes do you take? _____	
Conflicts: (All conflicts must be listed. No other conflicts will be permitted) _____ _____	

Parent Signature: _____ Date: _____

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For Office Use Only

Measurements: Bust _____ Waist _____ Hips _____ Girth _____ SIZE _____

Notes:

Rehearsal and Performance Dates: