



# METdance Youth Intensive

**\$35.00 Registration Fee**

**PLEASE PRINT NEATLY**

Num: \_\_\_\_\_

Name: \_\_\_\_\_

My strengths are in:  Ballet  Jazz

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Age: \_\_\_\_\_

Parents E-mail: \_\_\_\_\_

Parents Cell Phone: \_\_\_\_\_

Have you attended METdance Summer Intensive program before?  Yes  No What Year (s)?: \_\_\_\_\_ Level? \_\_\_\_\_

What weeks are you interested in: June 19-23 ; July 17-21 ; July 31-August 4

Training	Years Studied	School or Instructors: ( PLEASE PRINT CLEARLY)	# of Classes per week:
Ballet			
Jazz			
Modern			
Tap			

*Do not write below this line. METdance staff use only!*

Audition Evaluation:		Ballet	Jazz	Comments:
Weight/Proportions:				Coordination: <input type="radio"/> excellent   <input type="radio"/> good   <input type="radio"/> average   <input type="radio"/> poor Muscular Strength: <input type="radio"/> excellent   <input type="radio"/> good   <input type="radio"/> average   <input type="radio"/> poor Technique: <input type="radio"/> excellent   <input type="radio"/> good   <input type="radio"/> average   <input type="radio"/> poor Comprehension: <input type="radio"/> excellent   <input type="radio"/> good   <input type="radio"/> average   <input type="radio"/> poor Limited Ability in: <input type="checkbox"/> Ballet <input type="checkbox"/> Jazz Skill Level: Has potential, but lacking in: _____ _____ _____
Feet:				
Rotation				
Placement/ Alignment:				
Extension:				
Comprehension/ Memory:				
Phrasing/ Musicality:				
Movement Quality:				
Adagio/Balance:				
Turns/ Pirouettes:				
Jumps Small				
Jumps Big				
Floor Work:	XX			

Status:

- Reject       Accept  
 Level I     Level II  
 Pre