



STARS Dance Company Tryout Application

To try out for the 2022/23 Hoffman Stars Dance Company, please fill out the application in its entirety. All applications must be returned to Jessica Karbowski at jkarbowski@heparks.org by Wednesday, June 22, 2022.

Tryouts will be held on **Saturday, June 25th, 2022**, 2:30pm-5:00pm in the Triphahn Dance Studio.

Dancer's Full Name _____

Address _____

City _____ Zip Code _____ Phone # _____

Parent Primary Email (*all contact is through email*) _____

Birthday _____ Age _____ School grade for 22/23 season _____

If your dancers is asked to join the Stars Dance Company would you like your contact information distributed to the other company parents? Please circle 'Yes' or 'No' below.

Email: Yes No

Phone Number: Yes No

Dance History:

Please list any previous dance experience/classes, including: Style of dance, Location, Dates of classes, teachers and years taken.

Solo/Duet/Trios:

Solos, duets and trios will also be determined based off the group audition. Please indicate below if your child is interested in participating in a solo, duet and/or trio. Please remember this would be an extra cost added onto the company tuition fee. More details are listed in the Hoffman Stars Dance Company Parent Handbook.

My dancer would be interested in: *Please circle 'Yes' or 'No' below.*

Solo:	Yes	No
Duet:	Yes	No
Trio:	Yes	No
Quartet:	Yes	No

Would your dancer be interested in participating in 2 of the above if offered?

Parents:

I give permission for my child to participate in the 2022 Hoffman STARS Dance Company Auditions. I understand that the outcome of the audition is made by qualified teachers and that the decision of the teachers is not open for discussion. I have read and understand the 22/23 Dance Company Parent Handbook and understand the attendance and financial commitments required for the program. I also understand that pending acceptance into the Hoffman STARS Dance Company there will be additional costs, rehearsals, shows, commitments and rules that I will support my child in abiding by.

Parent Signature _____ Date _____