



2019-2020 Season

Application

\$15 Non-Refundable – Registration Fee

Additional \$10 Non-Refundable – Solo Fee

Please send application to hanah@moxieda.com prior to Auditions or Bring to Audition
(Students will not be allowed to audition until application and payment is received)

Name: Age: Birthdate:

Address:

City: State: Zipcode:

Parent's Name: Home Phone: ( )

Cell Phone: ( )

E-mail Address:

Emergency Contact: Phone:

Please indicate below the total number of years the student has participated in (years completed):

Dance Competition Team

Are you auditioning for Pre-Company?

Please indicate your favorite styles below:

Lyrical Jazz Hip Hop Contemporary

Tap Musical Theater Ballet

If you could choose, how many dances would you want to be in? Please consider costs! (1-7)

Are you auditioning for a solo?

Vacation Dates:

Other Sports/Activities involved in or hope to be involved in:

Student Signature: Date:

Parent Signature: Date:



## Solo Registration Form 2019-2020 Season

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NAME \_\_\_\_\_ PHONE \_\_\_\_\_

AGE \_\_\_\_\_ EMAIL \_\_\_\_\_

**In the best interest of the dancer, Moxie staff will determine the type of solo and the choreographer. Your input is extremely important; PLEASE provide us the following information. Your preferences will certainly be considered.**

PREFERRED AREA OF DANCE: \_\_\_\_\_

WHEN DO YOU PREFER TO REHEARSE?

(Circle choices) Weekdays    Saturday    Sunday

I understand and accept the MOXIE DANCE COMPANY SOLO RULES & REGULATIONS.

Dancer's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*DO NOT WRITE BELOW\*\*\*\*\*

CHOREOGRAPHER: \_\_\_\_\_

TYPE OF DANCE: \_\_\_\_\_

TITLE OF SONG: \_\_\_\_\_