



2026-2027 Season Application

Registration Fee – \$20.00

Solo Audition Fee – \$15.00 for 1st solo, \$25.00 for 2 solos (fees are per dancer)

Please send application to hanah@moxieda.com prior to auditions or bring to audition

All fees – CASH only and non-refundable.

(Students will not be allowed to audition until application and payment is received)

Dancer's Name: _____ *Age:* _____ *Birthdate:* _____

Address: _____

City: _____ *State:* _____ *Zipcode:* _____

Parent's Name: _____ *Cell Phone:* (____) _____

E-mail Address: _____

Emergency Contact: _____ *Phone:* _____

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

Recreational Dance _____ Competition Team _____

Auditioning for (check one) :

Pre Company (only attends 2 competitions) _____ Company _____

Please indicate your favorite styles below (check as many as you'd like) :

Acro _____ Ballet _____ Baton _____ Contemporary _____ Hip Hop _____

Jazz _____ Lyrical _____ Modern _____ Musical Theater _____ Tap _____

How many dances would you like to be in?

Please consider costs & time commitment! You may or may not get the desired amount (1-10) _____

Are you auditioning for a solo? (circle one) : NO YES - 1 or 2

Vacation Dates (very important) : _____

Other Sports/Activities involved in (email or attach schedule if you have it):

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

**1596 Johnstown Rd. NE, Dover, OH 44622 | info@moxieda.com | 330-987-5953
Hanah Moreland | Competition Director | hanah@moxieda.com | 803-673-4459**



Solo Registration Form 2026-2027 Season

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 (name two if auditioning for two): _____

WHEN DO YOU PREFER TO REHEARSE?(Circle choices)

Weekdays Saturday Sunday

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

Dancer's Signature: _____ Date _____

Parent's Signature: _____ Date _____

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

CHOREOGRAPHER: _____

TYPE OF DANCE: _____

TITLE OF SONG: _____