

AUDITION APPLICATION

HOW TO APPLY:

1. Complete the form and return to **The Graduate College of Dance, PO Box 8042, Subiaco East WA 6008** or email info@tgcd.com.au.
2. Enclose or attach applicant's last academic school report.
3. \$35.00 fee to be paid prior an audition date and time confirmed. Payable by EFT **BSB Number: 806-036 Account Number: 603609355**, or Visa / MasterCard over the phone – a 2% surcharge will apply.
4. Prior to auditioning the applicant must undergo an orthopaedic examination with the College's physiotherapist. The applicant must book an appointment with **Ian Lowther** on **9322 2210** at your own cost.

Please attach
passport size photo
here

1. Applicant's details. Please use BLOCK CAPITALS

Surname: _____ First name(s): _____
Date of Birth: _____ Gender (please circle): Male Female

2. Parent / Guardian contact details

Full name: _____
Phone: _____ Email: _____
Address: _____

3. Dance background

Name of current dance school: _____ Number of years dancing: _____
Last examination taken and syllabus: _____ Result: _____
Any dance related subjects studied: _____

Do you study music or a musical instrument: _____

4. Academic background

Name of school: _____ Current year of study: _____

5. Medical/injury background

List medical condition(s): _____

List past and present injuries: _____

I give consent to my child / ward auditioning for The Graduate College of Dance

Signature: _____ Relationship to applicant: _____
Name in full: _____ Date: _____