

Mystic Ballet - Audition Form

PLEASE DOWNLOAD FIRST
FILL IT OUT

Start the process by completing the form

EMAIL IT TO info@mysticballet.org

Dancer Name:	<small>First</small> <input type="text"/>	<small>Last</small> <input type="text"/>
Date of Birth:	<small>mm/dd/yyyy</small> <input type="text"/>	
Age:	<input type="text"/>	Height: <input type="text"/>
Sex:	<input type="text"/>	Weight: <input type="text"/>
Address:	<small>Street Address</small> <input type="text"/>	
	<small>Street Address Line 2</small> <input type="text"/>	
	<small>City</small> <input type="text"/>	<small>Region</small> <input type="text"/>
	<small>Postal / Zip Code</small> <input type="text"/>	<small>Country</small> <input type="text"/>
Email:	<input type="text"/>	
Cell Phone:	<input type="text"/>	
Citizenship:	<input type="text"/>	
Visa Status:	<input type="text"/>	
Links to Video:	<input type="text"/>	
	<input type="text"/>	
How did you hear about the Audition		
<input type="text"/>		

Once you've completed the form save your file and attach it along with your
CV | Headshot | Full body shot.