

NUTCRACKER AUDITION REGISTRATION FORM:

Dancer's Name _____

Birthdate _____ Age _____

Contact Numbers _____

Email Address _____

Parent/Guardian Name _____

Responsible Party/Parties _____

Emergency Contact _____

Emergency Contact Number _____

Dancer: Known Allergies _____

Height, Costume Sizing, Behavior, Focus, Reliability, Attendance, along with adaptability to choreography are all considered in the Audition.

MEASUREMENTS FOR NUTCRACKER

Parents please use the chart provided to measure your dancer.

Dancer's Name _____

Birthdate _____ Age _____

Measure in inches please. Measure in stocking feet, against a wall, do not wear bulky clothing so you can be flat against the wall.

Weight _____

Chest _____

Waist _____

Hips _____

Inseam _____

Outseam _____

Arm from top of shoulder to wrist _____

Torso from back of neck to waist _____

Shoe Size _____

Height _____

