

# Maple Conservatory of Dance

1824 Kaiser Avenue • Irvine, CA 92614 • www.mapleconservatory.com

## Student Enrollment Application (Conservatory Program 2008/2009)

Please complete this application and submit it either in person or by mail. The application must be accompanied by a \$20.00 fee. Enrollment in our Conservatory program is limited and not guaranteed. Upon review of your application, we will schedule a preliminary placement class that will take place in August 2008. If you are not able to attend your scheduled date & time, you must immediately send us a request for a make-up class as no placement classes will be scheduled after August 25. Note that once the application is submitted, the application fee is non-refundable.

For dancers interested in applying to our Professional Division (recommended ages 13 to 19), a separate application will be required in addition to this application. Applicants must attend our Professional Division audition class on Saturday, August 2, 2008 to be considered for admission.

*\*Note that acceptance into the Professional Division is only **by audition**. No audition is required for the Classical Division, however dancers are required to take a placement class prior to admission.*

**Applicant (Dancer) Name:** \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Gender: \_\_\_\_\_ Female \_\_\_\_\_ Male

Applicant's Home Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Applicant's Email Address: \_\_\_\_\_

**Mother/Guardian Name:** \_\_\_\_\_

Home Address (if different from applicant) \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mother's Email Address: \_\_\_\_\_

**Father/Guardian's Name:** \_\_\_\_\_

Home Address (if different from applicant) \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Father's Email Address: \_\_\_\_\_

### Applicant's Prior Ballet/Dance Training:

Age when ballet training began: \_\_\_\_\_ Years of ballet training: \_\_\_\_\_ Years of pointe training: \_\_\_\_\_

### List of Studios Attended:

Name of studio: \_\_\_\_\_ City/State: \_\_\_\_\_

Date of attendance: \_\_\_\_\_ List of Classes Taken: \_\_\_\_\_

Level placement at your prior school: \_\_\_\_\_ # of levels at your prior school: \_\_\_\_\_

**Applicant's Prior Ballet/Dance Training: Continued**

Name of studio: \_\_\_\_\_ City/State: \_\_\_\_\_

Date of attendance: \_\_\_\_\_ Last level placement: \_\_\_\_ # of levels at your prior school: \_\_\_\_

Classes Taken: \_\_\_\_\_ Hrs/Week: \_\_\_\_\_

Instructors: \_\_\_\_\_

Name of studio: \_\_\_\_\_ City/State: \_\_\_\_\_

Date of attendance: \_\_\_\_\_ Last level placement: \_\_\_\_ # of levels at your prior school: \_\_\_\_

Classes Taken: \_\_\_\_\_ Hrs/Week: \_\_\_\_\_

Instructors: \_\_\_\_\_

Name of studio: \_\_\_\_\_ City/State: \_\_\_\_\_

Date of attendance: \_\_\_\_\_ Last level placement: \_\_\_\_ # of levels at your prior school: \_\_\_\_

Classes Taken: \_\_\_\_\_ Hrs/Week: \_\_\_\_\_

Instructors: \_\_\_\_\_

**Ballet Training Goals and Objectives:**

Please describe your dancing goals and objectives: \_\_\_\_\_

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Please use this space to share any information you would like us to know about you: \_\_\_\_\_

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Thank you for applying to the Maple Conservatory of Dance! Upon review of your application, you will be notified of your scheduled preliminary placement class. We will look forward to seeing you soon.

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To be completed by Maple Conservatory of Dance Staff:

Received: \_\_\_\_\_ Reviewed by: \_\_\_\_\_ Placement Class Date/Time: \_\_\_\_\_