

SUMMER PROGRAM
REGISTRATION
FORM 2019

oFuro

GENERAL INFORMATION

NAME	
PHONE NUMBER	EMAIL
ADDRESS	CITY / COUNTRY
POSTAL CODE	CITIZENSHIP
AGE	ACADEMIC GRADE
DANCE SCHOOL	CITY/COUNTRY
HOURS OF TRAINING PER WEEK	

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REGISTRATION
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PARENT / GUARDIAN (IF UNDER 18)

EMAIL	PHONE NUMBER
NAME	RELATIONSHIP
ADDRESS	CITY / COUNTRY
POSTAL CODE	

EMERGENCY CONTACT

NAME	RELATIONSHIP
PHONE NUMBER	

MEDIAL INFORMATION

ALLERGIES	DIETARY RESTRICTIONS
INJURIES	OTHER

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HOW TO APPLY

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Attach 2 videos links: 1 Ballet + 1 Contemporary
(YouTube, Vimeo, Drop Box, or BPX) |
| <input type="checkbox"/> | Attach headshot |
| <input type="checkbox"/> | Fill out information sheet(s) |
| <input type="checkbox"/> | Submit via e-mail to: info@ourocollective.com |
| <input type="checkbox"/> | Subject line: Summer School Audition |
| <input type="checkbox"/> | Deadlines: June 15, 2019 (International)
June 30, 2019 (Canada) |