



NYS DI 2008 APPLICATION

NAME _____

PERMENENT ADDRESS _____

CITY _____ STATE _____ ZIP _____

COUNTRY _____

PHONE _____ EMERGENCY # _____

EMAIL _____

CITIZENSHIP _____

AGE: 18-20 20-30 30+ SEX: MALE FEMALE

SCHOOL ADDRESS _____

VALID UNTIL _____

Dance Training and Education (please list schools, instructors, and length of study):

PLEASE ATTACH CV OR RESUME

Performance Experience (please list names of companies, choreographers, and dates):

PLEASE ATTACH CV OR RESUME

Acceptance Agreement: My signature below verifies that, if accepted, I will abide by all rules and regulations as required.

SIGNATURE _____

SIGNATURE OF PARENT OR GUARDIAN
(if under 18) _____

DATE _____

Complete this application and bring to your in-class audition or mail with a videotape to:
Dance New Amsterdam
NY Summer Dance Intensive
280 Broadway, 2nd Floor
New York, NY 10007