



Student History Form

Today's Date: _____

Student's Last Name: _____ Age: _____

Student's First Name: _____ Birthday: _____

Experience:

Style	# Years	
Ballet	_____	_____
Jazz	_____	_____
Tap	_____	_____
Modern	_____	_____
Other	_____	_____

_____ Type of Other

Previous Training:

Please list below all dance schools attended or currently attend starting with present or most recent.

_____	_____	to _____	_____
School	Years		Instructor
_____	_____	to _____	_____
School	Years		Instructor
_____	_____	to _____	_____
School	Years		Instructor
_____	_____	to _____	_____
School	Years		Instructor
_____	_____	to _____	_____
School	Years		Instructor

Class Goals:

Please check any that apply.

- Want a fun way to stay active. _____
- Want to explore my love for dance/ballet. _____
- Want to improve my ballet technique to provide a basis for other form(s) of dance. _____
- Want to train for a professional career in dance/ballet. _____
- Am interested in a pre-professional program. _____

How did you hear about The Ballet Académie? _____