

Clara / Ellie Information Sheet 2021

Staff Only #	

Audition Information Form

Name Parent(s)Names			
City			State
Parent Cell Phone			
Parent E-Mail Address			
Age	Date of Birth		Height
Dance School			
Agent/Manager (If you have one)			Phone
Have you received Covid 19 vaccination ?		Yes	No
Date of your Covid vaccinat	ion(s)?		

Please note everyone in who is cast in RCCS will need to be fully vaccinated.

How did you hear about the audition?

After filling out, please save as PDF and attach to your email. Go to File/Save As and select PDF or open in Adobe Acrobat and Save As PDF. Please add your child's name and "RCCS21" to the file name of the PDF. (For example: JaneSmithRCCS21.pdf)