

For Office use Only	MDT REGISTRATION FORM 2024-2025 SEASON (Please print clearly)
PR #	

MDT respects your privacy and pledges to maintain the confidentiality of your personal information.

Sign-Up: Participant

First Name	Last Name		
Address		City	
Email Address	Phone Number	DOB (Mth/Day/Yr)	

Participant: Background

Current Occupation	Industry/Field	City (Work)
---------------------------	-----------------------	--------------------

Dance & Performance Experience / Participation / Contributions

	YES	NO	SOME	# of YEARS	WOULD YOU LIKE TO:					
					TEACH		PERFORM		CHOREOGRAPH	
BALLET					Y	N	Y	N	Y	N
POINTE					Y	N	Y	N	Y	N
JAZZ					Y	N	Y	N	Y	N
MODERN					Y	N	Y	N	Y	N
HIP HOP					Y	N	Y	N	Y	N
TAP					Y	N	Y	N	Y	N
Other Dance Experience: (please list)										
					Y	N	Y	N	Y	N
					Y	N	Y	N	Y	N

OTHER TALENTS: (ie: Singing, Acting, Juggling, Musical Instrument, etc.)

Other Talents: (please list)	Years	WILLING TO PERFORM/SHOWCASE	
		YES	NO
		YES	NO

Participant: Availability

AVAILABILITY

(please circle)

Wednesdays from:	6-10pm	YES	NO	Not available between:
Sundays from:	12-5pm	YES	NO	Not available between:

Please list any possible scheduling conflicts that you foresee might interfere with any rehearsals our annual show week aiming to take place April 27 - May 3, 2025 OR May 4 - 10, 2025 (ie: Vacations, Work, etc.):

Based on your availability, please identify how many pieces to which you think you would be ready to commit. Approx. 8 x 1 hr rehearsal slots for each piece. (Please circle)

2 to 4
4 to 6
6+

