

For Office use Only	MDT REGISTRATION FORM 2025-2026 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)
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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 last week of April or first of May 2026 (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+

Getting to know you: (optional)

Please tell us why you would like to join MDT:

[illegible]