Bravo Dance Company Audition Application 2021-2022

This form must be turned in at auditions on Saturday, May 15th!



Dancer Name:______ Parent Name:_____

Dancer 2021-2020 Grade		Dancer Birthday:
Below, pl	ease neatly write the	e email address you would like callback information sent to:
EMAIL	:	
		I understand my placement in Bravo Dance Company is final.
	Dancer Initial Here Dancer Initial Here	I understand that NOT all dancers will receive a call back for Sunday. I understand not being called back does not mean I was cut from Bravo Dance Company.
	F	Waiver or the period of May 2021-June 2021
from any and ing Covid-19 c (studio, lobby physical conta	e of 18 or as the legal parent or all liability, claims, demands, ar or injury, including death, that n or restroom) of a Bravo Dance	guardian, I release and hold harmless Bravo Dance Center GA LLC, its owners and operators and causes of action whatsoever, arising out of or related to any loss, damage, sickness, includnay be sustained by the participant and/or the undersigned, while in or upon the premises Center Ga LLC, event or in route to or from any of said premises. I understand that appropriate ction of dance and, tumbling and I give permission for instructors to make appropriate physical
Bravo Dance (Center Ga, LLC, assumes no resp	consibility for lost, misplaced, or stolen articles.
Participant Na	ame	
Parent Name_		
Parent Signature		Date