



## APPLICATION

### **Dancer Information**

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Dance/Cheer Experience

Do you have Cheer/Dance Experience? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, How long? \_\_\_\_\_

Do you have dance training? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, what style? \_\_\_\_\_

Do you have choreography experience? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you interested in being a Team Captain? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you led a dance/cheer team? Yes \_\_\_\_\_ No \_\_\_\_\_ How long? \_\_\_\_\_

Name of Team \_\_\_\_\_

### Employment/Work Schedule

Are you currently employed? Yes \_\_\_\_\_ No \_\_\_\_\_

Day	Hours	Comments
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____
Sunday	_____	_____

**Education/School Schedule**

Are you currently attending school? Yes \_\_\_\_\_ No \_\_\_\_\_

Day	Hours	Comments
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____
Sunday	_____	_____

Do you have transportation? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain \_\_\_\_\_

\_\_\_\_\_

**Please provide your social media information below.**

Twitter \_\_\_\_\_

Instagram \_\_\_\_\_

YouTube \_\_\_\_\_

Facebook \_\_\_\_\_

**An application form sometimes makes it difficult for an individual to adequately summarize a complete background.**

**Use the space below to summarize any additional information necessary to describe your full qualifications.**

Additional Info: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I certify that the facts set forth in this application are true and complete to the best of my knowledge. I understand that if I make the team, false statements on this application shall be considered sufficient cause for dismissal.

By signing below, each party warrants and represents that they have full and complete authority and authorization to execute this agreement. Each party also warrants and represents that the persons signing this Agreement has been duly authorized and has full authority to execute the Agreement on behalf of the Dancer.

Dancer \_\_\_\_\_

Triple Threat Productions

Name \_\_\_\_\_

Director of Operations

*(Print)*

Tareita Nephew

\_\_\_\_\_  
*(Signature)*

\_\_\_\_\_  
*(Signature)*

Triple Threat Productions is an equal opportunity company. We adhere to a policy of making decisions without regard to race, color, religion, sex, sexual orientation and national origin. We assure you that your opportunity work with Triple Threat Productions depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.