

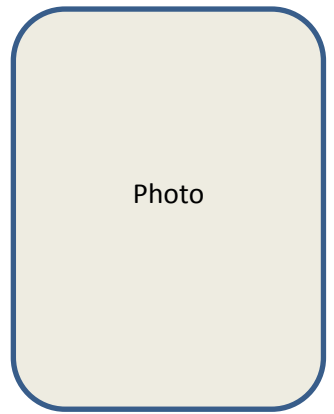
BTB

BALLETTSCHULE THEATER BASEL

Elisabethenstrasse 16 - Postfach 4010 Basel - Tel. 061 295 14 40/45

www.ballettschuletheaterbasel.org

btb@theater-basel.ch



Audition Application form – Ballettschule Theater Basel

Name.....

Address.....

Telephone..... Mobile phone.....

E-mail.....

Date of birth.....

Nationality / Current passports.....

Height.....

Weight.....

Allergies.....

Previous injuries.....

Existing medical conditions.....

Academic school level (year).....

Name of academic school.....

Name of ballet school.....

Started ballet at the age of.....

Number of ballet classes per week at present.....

Number of modern classes per week at present.....

Parent's Name.....

Parent's address.....

Parent's Telephone..... Mobile phone.....

Parent's e-mail.....

Date..... Signature student:.....

Signature Parent:.....

Please add a
Passport Photo on
top and 2 full
body photographs
in your ballet
cloths.