ROYAL BALLET SCHOOL

46 Floral Street \cdot Covent Garden \cdot London WC2E 9DA

Tel: +44 (0)20 7845 7068 Fax: +44 (0)20 7845 7067

Reference No: (For office use only)

Please state in the box the centre at which you wish to audition and attend classes.

If necessary, you may audition in one venue to attend classes in another please ✓ both centres if required.

Audition

Centre

Please tick

Centre

London

Birmingham

Class

Centre

Please tick

London & Birmingham centres only:
Please tick box for preferred attendance

32 sessions

32 sessions

24 sessions

24 sessions

JUNIOR ASS	OCIATES	Bath		20 sessions only (tbc)
APPLICATION		Eastleigh		32 sessions only
		Leeds		32 sessions only
(8, 9 & 10 YEAR C	JLD3 ONLY)	Manchester		28 sessions only
Reference No:		Newcastle		28 sessions only
(For office use only)		Totnes		32 sessions only
Applications by email or t	rn this form with original pho fax are not accepted. All applic ge-range for the course. <i>n.b. Ag</i>	cations received bet	fore the closing date wil	e AUDITIONS COORDINATOR. I be offered an audition providin
Please use BLOCK CAPITALS	throughout (including your ema	ail address).		
1. APPLICANT'S NAME	Surname			
	First Name(s)			
2. HAS AN APPLICATION	N BEEN SUBMITTED PREVIOU	JSLY FOR ANY RO	DYAL BALLET SCHOOL	L COURSE? YES NO
				PLEASE TICK
, 0	ne following information from	,		
Which Course/s?		For v	which year of entry d	id you apply?
3. Date of Birth	Day Month	Yea	r	Gender M F PLEASE CIRCLE
4. NATIONALITY				
	Correspondence will be se	ent to Parent(s) or	Guardian at this add	dress.
5. Address	Address			
Dlagge price to II	Addiess			
Please print all details <u>CLEARLY</u>	Town	C .		
in BLOCK CAPITALS				
including your			,	
email address	Home Tel			
	Mobile			
	Email (PRINT <u>CLEARLY</u>)			
	Send correspondence to	Parent(s)	or Guardian	
	TitleInitials	Surname		
6 Wright			T	
6. WEIGHT & HEIGHT	WeightStLbs or	Kilos	Height Ft (in bare feet)	ins or Metres
· ·			-	

7. Name of Parents / Legal Guardians

	FATHER	MOTHER
	Full Name (Inc title) Occupation	Full Name (Inc title) Occupation
	Father's Height Ft ins	Mother's Height Ft ins
	metres	metres
8.		ES NO IF YES, NUMBER OF YEARS
	IF YES, NUMBER OF LESSONS PER WEEK	LEASE CIRCLE
	Ballet	Modern Gymnastics Other
	DANCING SCHOOL These details are required for our records.	
a)	Name of Principal Miss/Mrs/Ms/Mr	
	School Name	
	Address	
	Town County	
	Country	Tel Number
	Email	
	Signature of PRINCIPAL	
b)	Name of Teacher Miss/Mrs/Ms/Mr	
	Address for correspondence	
	TownCounty	Postcode
	,	Tel Number
	Email	
	Signature of TEACHER	

10. ACADEMIC SCHOOL

Current year attended (i.e. Year 4,5,6)			
School Name			
Address			
Town	County	Postcode	
Tel Number	,		
Headmaster / Headmistress Miss/Mrs/Ms/Mr			

11. MEDICAL

PLEASE CIRCLE

a) HAVE YOU BEEN UNDER THE CARE OF A DOCTOR OR PHYSIOTHERAPIST IN THE LAST 6 MONTHS?

b) Do you take any kind of medication?

YES	No
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c) Do you have any medical conditions or allergies that the school should be aware of?



If YES to any of the above, please give details on a separate sheet.

d) Are glasses / contact lenses worn?

12. FINANCIAL ASSISTANCE - ASSOCIATE COURSE

The Royal Ballet School has limited financial assistance available. Parents of successful candidates seeking financial support will be required to submit a detailed **Declaration of Income** form for consideration which will be sent to you if successful in audition. Any information will be held by the Head of Finance and treated with strictest confidence.

PLEASE CIRCLE

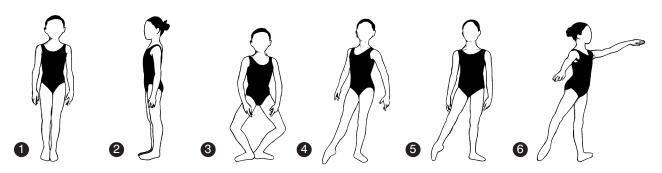
If you are accepted on an Associate course would you like an application form for financial assistance?

Yes No

13. PHOTOGRAPHS REQUIRED FOR BOYS AND GIRLS

We do not return photographs.

Candidates should enclose postcard size original photographs of themselves - one in each of the positions shown below - with their applications.



WHAT TO WEAR IN YOUR PHOTOGRAPH:

GIRLS should wear leotard with no skirt or frills, hair should be neatly groomed, bare feet.

BOYS should wear trunks/dance shorts, light fitted T-shirt or leotard, bare feet.

14. APPLICATION CHECKLIST AND PAYMENT METHOD

The application and enclosures MUST reach the JA Auditions Office by the CLOSING DATE as stated on the attached sheet.

Late applications may be returned to you or, if accepted, will be subject to an additional charge of £10.00.

Do NOT telephone the Audition Office to confirm receipt of your application. We recommend the use of a Guaranteed Delivery postal service to track the delivery. Acknowledgments will be sent following receipt of your application and audition details will be sent out approximately two weeks before your audition date.

We do not return photographs. No correspondence or discussion can be entered into following the result of an audition.

Non refundable	DN FEE: JUNIOR ASSOCIATE AUDITION £30
PAYMENT METH	HOD:
CARDS	We accept Visa and Mastercard. We do not accept Amex, Visa Electron or Maestro.
CHEQUES	Cheques/bank drafts are accepted in GBP (British £ Sterling) only. We do not accept Eurocheques. Cheques should be made payable to 'The Royal Ballet School' and crossed AC Payee Please write the candidate's name, address and audition venue on the back of the cheque
BANK TRANSFER	Please see payment form.
	DO NOT SEND CASH (cash payments are not accepted)
Audition and Parental or Legarithm Dance Teacher	photographs as per instructions (see no.13) Class Centre selection (page 1) gal Guardian signature er's details and signature ve as any incomplete package or missing details may result in a delay in processing your application which could affect ected audition. Please also ensure you have the correct postage for your package size/weight as underpayment may ry.
	SEND APPLICATION, ENCLOSURES AND PAYMENT TO:
Auditions Coo	ordinator, Ref: JA, The Royal Ballet School, 46 Floral Street, Covent Garden, London WC2E 9DA
Royal Ballet School w	vill not be held responsible for any damage or injury, however caused, to any person attending an audition, nor the loss of any property.
noyur bunct sensor n	,, ,
,	DR LEGAL GUARDIAN

We may retain the personal information you provide to us on this form for historical and archival purposes. This may include any confidential records or personal data such as

your medical history. Please tick this box if you do not consent to the use of your personal data for these purposes.



ETHNICITY SURVEY

Training at The Royal Ballet School is open to all candidates regardless of ethnic origin. Organisations are now requested to keep data about the ethnic group of their applicants and your response to the following questionnaire is greatly appreciated. Individuals providing information remain anonymous as this form will be detached from your application and used for statistical purposes only.

Please indicate the category which best describes the candidate's ethnic origin and return with the application form. (please ✓ as appropriate) Thank you for your co-operation.
□White
□White - British
□White - Irish
□White - Scottish
□Irish Traveller
□Other White background
□Black or Black British - Caribbean
□Black or Black British - African
□Other Black background
□Asian or Asian British – Indian
□Asian or Asian British - Pakistani
□Asian or Asian British - Bangladeshi
□Chinese
□Other Asian Background
□Mixed – White and Black Caribbean
□Mixed – White and Black African
□Other Mixed Background
□Other Ethnic Background
□Not known
□I do not wish to state my ethnic origin



Ref No: 03.0.033.0120

Office use only

Bank Transfer, Credit Card or Cheque Payment Form - JUNIOR ASSOCIATE

Cards accepted: Visa and Mastercard only.

We **do <u>NOT</u>** accept American Express, Maestro, Solo or VISA Electron. Cheques must be issued on UK (GBP£) cheques ONLY.

Candidate Details - please print cle	early in CAPITAL LETTERS
Student's Name:	
Venue Applied for:	Birmingham ☐ Bath ☐ Eastleigh (Southampton) ☐
	Leeds □ London □ Manchester □
	Totnes (Dartington Space) \square Newcastle–upon-Tyne \square
	Any applications accepted after the close date will incur an additional fee of £10
Payee Details - please complete this	
Payee / Cardholder's Name:	
Payee / Cardholder's Address: (Including postcode)	
Telephone No:	
Email Address:	
Cheque details	
Bank Name:	
Cheque Number:	
Sort Code:	/
Bank Transfer details - Please ensure you	have paid all bank charges and remit the exact amount in sterling (GBP£) only.
Reference Number:	Please state the candidate's name and "JA Audition" on your bank transfer
Credit card details - Please note: 2%	will be added to credit cards and 0.3% to debit cards to cover our own costs.
Card Type:	Visa Debit ☐ Mastercard Debit ☐
	Visa Credit ☐ Mastercard Credit ☐
Card Number:	
Security Code: (final 3 digits on magnetic strip)	
Expiry Date:	
Amount payable:	£30

Cardholder's Signature: Date: /....../