

**MDAA 2024 SPECIALTY SCHOLARSHIP AUDITION FORM-Page 1**

You MUST print both Pages on ONE sheet of paper-double sided, NO EXCEPTIONS



**IMPORTANT: To audition, your complete registration must be POSTMARKED by March 29, 2024**

**PLEASE Print Clearly**

Student Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Age: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Dance studio \_\_\_\_\_

Name of primary dance teacher:  
\_\_\_\_\_

Teacher Contact # \_\_\_\_\_

Parent's Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

***The above-named student will come to the designated audition location and time prepared with a short presentation to present to a panel of adjudicators. Presentation to be no shorter than 1.5 minutes and no longer than 2 minutes. Presentation should demonstrate the student's abilities in the chosen discipline.***

X \_\_\_\_\_

Signature of primary teacher (required). Must be current Professional Member.

Primary teacher's signature confirms the selected scholarships are appropriate for this student.

Chosen Discipline:

\_\_\_\_\_

Name of Program this student plans to attend:

\_\_\_\_\_

Location of Program, City/State:

\_\_\_\_\_

Dates of Program:

\_\_\_\_\_

Short Description of Classes offered:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**Continue to page 2**

**MDAA 2024 SPECIALTY SCHOLARSHIP AUDITION FORM-Page 2**  
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Student's Name \_\_\_\_\_

This student registered and paid for the MDAA 2023 Fall Workshop in Great Falls. \_\_\_\_ yes \_\_\_\_ no

If no, student must pay the Fall 2023 workshop fee of \$150 to be eligible to audition.  
If the student only paid for a Fall 2023 2-day pass; an additional \$25 is due to be eligible to audition.  
If the student only paid for a Fall 2023 1-day pass; an additional \$50 is due to be eligible to audition.

**Fees Due**

Audition Fee	\$30.00
2023 Fall Workshop fees due, if any	_____
Total Audition Fees Due	_____

You may pay by check made out to MDAA or your MDAA Jackrabbit account will be billed.

**Check list to be sure your application is complete.**  
**Incomplete applications may render you**  
**ineligible to audition.**

**All Auditions**

1. \_\_\_\_ Scholarship Audition Form
2. \_\_\_\_ Include a 5x7 photo on **photo paper only** in a pose appropriate to the chosen discipline.
3. \_\_\_\_ Copy of a brochure/web pages from the out-of-state program you plan to attend.  
**Must show dates, schedule of classes, tuition costs.**
4. \_\_\_\_ Copy of acceptance letter from the out-of-state program you plan to attend if an audition process is required by the program.

**Before signing, please refer to the Candidate/Parent/Guardian responsibilities in the SCHOLARSHIP AUDITION RULES and read rules completely.**

By signing below, I give permission to MDAA to publish the name, studio affiliation & hometown of me/my child on the MDAA website, Facebook, & for use in grant applications and reports.

X \_\_\_\_\_ Print Name \_\_\_\_\_  
Student Signature (if over 18)

X \_\_\_\_\_ Print Name \_\_\_\_\_  
Parent/Guardian Signature

**Mail complete Scholarship Application to:**  
**MDAA, 718 Logan Street, Helena, MT 59601**  
**Postmarked by 03/29/2023**