

FREQUENT FLYERS® AERIAL DANCE

Aerial Dance Intensive Training Program Application for 2021-2022

Applicant Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Home) _____ (Mobile) _____

Email: _____

Guardian/Emergency Contact Name: _____

Guardian/Emergency Contact Relationship: _____ Phone: _____

Guardian/Emergency Contact Email: _____

Grade & School Attending for 2021-2022 School Year (if applicable): _____

Have you been a student of Frequent Flyers for 1 year or more? Circle: YES NO
In what horizontal apparatus are you a level 3 (int/adv) or above? Circle all that apply.

Lyra/Hoop Low Flying/Dance Trapeze Static Trapeze

If yes, in what vertical apparatus are you a level 3 or above? Circle all that apply.

Fabric/Silks Rope/Corde Lisse Sling/Hammock

If you are not a current student, please list your prior movement and aerial experience including the specific type of movement and apparatus and years of study.

Please list the estimated number of aerial performances you have participated in: _____

Do you have any medical conditions? Yes No

If yes, please list: _____

Do you take any medications? Yes No

If yes, please list the medications and dosage, and if you carry that medication with you:

Do you have any current physical injuries? Yes No

If yes, please list: _____

Please list all of your past significant physical injuries, including the dates they occurred.

I certify that the above information is complete and accurate. I have read and understand the program requirements and financial commitment of the Aerial Dance Intensive Training Program.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature (if minor): _____ Date: _____

PLEASE SUBMIT COMPLETED APPLICATIONS IN PRINT OR VIA EMAIL BY MONDAY AUGUST 2ND AT 5 PM. AND REGISTER FOR / ATTEND THE AUDITION ON WEDNESDAY, AUGUST 4, 2021 from 6:30-9PM. NOTIFICATION DATE: FRIDAY, AUGUST 6TH.

Application Submissions and Questions:

Nancy Smith, Artistic Director
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303-245-8272

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