



Apprentice Program Application (please bring with you when you audition)

Check which session you are applying for: July 16 – August 4 August 6- 25 Both

Apprentice Name: _____

Apprentice Home Address: _____
(please include city, state and zip)

Apprentice Mailing Address: _____
(information that parents will need to read and sign will be mailed here, please include city, state and zip)

Apprentice Phone: _____

Parent/Guardian Name: _____

Parent/Guardian Address: _____

Parent/Guardian Phone (day & evening): _____

Additional Parent/Guardian Name: _____

Additional Parent/Guardian Address: _____

Additional Parent/Guardian Phone (day & evening): _____

Last grade completed:
Grade: 4 5 6 7 8 9 10 11 12

Age: _____ **Date of birth:** _____

Acting experience:
Name of show or program: _____ **Name of director or instructor:** _____ **Dates:** _____

Musical experience:
Name of show or program: _____ **Name of director or instructor:** _____
Dates: _____

Technical theater experience:

Name of show or program:

Name of director or instructor:

Dates:

Other related experience:

Do you play a musical instrument? YES NO If yes, what? _____

Do you sing? YES NO If Yes, what voice part? _____

Any special interests or skills? (i.e. sewing, painting, carpentry, computer, etc.)

Any scheduling conflicts—vacations, camps, times you’ll be away? (Please see important dates below.)

Important Dates:

Monday, June 11

Applications for Tuition Scholarships must be received by this date

Friday, June 15

Scholarship recipients will be notified.

Friday, June 22

Tuition due

Monday, July 16

Session One begins

Saturday, August 4

Session One Performance

Monday August 6

Session Two begins

Saturday August 25

Session Two Performance

Signature of Parent/Guardian: _____ **Date** ____ / ____ / ____



Administrative Office 585-374-9032 email: info@bvtnaples.org

www.bvtnaples.org