



Audition # _____

HAWKINS

DANCER'S NAME: _____

DANCER'S AGE (AS OF SEPT 1ST, 2025): _____

PARENT NAME: _____

PARENT EMAIL: _____

PARENT PHONE NUMBER: _____

Interest

Please indicate your interest below by checking the corresponding box(es).

We will consider this information as we place you in the most appropriate performance group.

Hawkins Performing Arts Company (Ages 5-18)

Tap Competition Class (Ages 8-18)

Delayed Reaction (Ages 11-18)

Hip Hop Competition Class (8-18)

Additional Questions/Comments:
