

*****DIA DANCER BASIC INFO 2016-2017*****

NAME: _____

AGE: _____ GRADE: _____

BIRTHDAY: _____

DO YOU HAVE ANY NICKNAMES: _____

DO YOU HAVE A CELL PHONE, IF YES WHAT IS YOUR #: _____

IF NO CELL PHONE, WHAT IS THE BEST # TO CONTACT YOU: _____

YOUR (DANCER) EMAIL ADDRESS: _____

DO YOU HAVE A FACEBOOK::: _____ DO YOUR PARENTS: _____

HOME ADDRESS & CITY:

WHAT SCHOOL DO YOU GO TO: _____

WHERE DO YOU WORK: _____

FAVORITE COLOR: _____

FAVORITE
CANDY/TREAT: _____

FAVORITE
DRINK: _____

FAVORITE ANIMAL: _____

*ARE YOU ALLERGIC TO ANY FOOD OR DRINK: (Things we may have in class)

*FAVORITE SINGERS/MUSIC GROUPS/SONGS: (to help us make warm up playlists)

**GOALS FOR YOURSELF AND/OR YOUR TEAM THIS DANCE SEASON: