



# 2018 JAIMIE HILL - TAMMY-LYNN POWERS MEMORIAL FOUNDATION SCHOLARSHIP AUDITIONS

**THIS FORM MUST BE FILLED OUT IN ITS ENTIRETY.**

Full Name \_\_\_\_\_

**EMAIL** \_\_\_\_\_ **PHONE NUMBER** \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Age (as of 1/1/2018) \_\_\_\_\_ Parent/Guardian Name: \_\_\_\_\_

Years of Experience \_\_\_\_\_

Dance Discipline (check all that apply)

Tap  Jazz  Ballet  Other \_\_\_\_\_

**Studio/Performing Arts School Name**

\_\_\_\_\_  
\_\_\_\_\_

Adjudicator Use Only

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_