

Ballet School of the Hamburg Ballet
Caspar-Voght-Str. 54, D-20535 Hamburg, Tel.: +49 (0)40 35 68 930 / -931
Email: schule@hamburgballett.de

APPLICATION FORM

Name:	First Name:
Date of Birth:	Place of Birth:
Nationality:	
Academic School:	
Academic Form or Grade next School Year:	
Languages spoken:	
Ballet Schools previously attended, how many years:	
Teacher's Name:	
Ballet Lessons per Week:	
Name of Parents or Legal Guardians:	
Address:	Telephone:
	Mobile/Cell phone:
Postal Code:	City:
	Email:
Boarding School: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Weight:	Height:
	Mother's height:
	Father's height:
Other Remarks:	

Important! Please send us 3 photos in a leotard of the following positions:

Attitude derrière effacé (girls on pointe from 13 years old)

Tendu à terre à la seconde en face

4th position croisé (girls on pointe from 13 years old)

Date: _____ Parent's Signature: _____