

**BRING THE COMPLETED COLOR GURAD APPLICATION to  
THE FIRST DAY OF WORKSHOP!**

## **East Peoria Color Guard Audition Application**

Name: \_\_\_\_\_ Grade (next year): 9 10 11 12  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Parent/Guardian Name(s): \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_  
Email(s): \_\_\_\_\_  
Current GPA: \_\_\_\_\_ Date of birth: \_\_\_\_\_

**Do you have any color guard or dance background? If yes, please elaborate.**

**Name a person you admire and explain why you admire him/her.**

**What are you passionate about?**

**How will you make a valuable asset to the team?**

**Do you have any medical issues that we should be aware of? (Injuries, allergies, asthma, etc.)**

**In 75-100 words, describe the expectations you have as a member of the East Peoria Color Guard. (What do you hope to gain from this experience? What unique qualities would you bring to the team? What will practices be like? How will you feel about performing?) Please use the back of this paper for your answer**