

HTEDance Team Training Camp Custom Choreography Work Sheet

*One page and copy of music per routine please.

Due to HTEDance no later than June 15

1 2 3 4 5 of 5 Routines
(circle #)

CAMP ATTENDING: _____

DATES OF CAMP: _____

School: _____	Team Name: _____
Director: _____	
Work Email: _____	
Home Email: _____	
Home Phone: _____	Cell Phone: _____
Work Phone: _____	Fax Number: _____
Summer Mailing Address: _____	
City, State, Zip: _____	
Assistant Director: _____	
Home Phone: _____	Cell Phone: _____

Team Information:	
_____ # of team members attending camp	
_____ # of dancers for each routine (for formation use)	
_____ # of military/dance officers	
Ability level of team: <i>(check one)</i>	
_____ Beginner	_____ Officers dance in front
_____ Beginner/Intermediate	_____ Officers dance with team
_____ Intermediate	
_____ Intermediate/Advanced	Dancers are placed in formations:
_____ Advanced	_____ According to ability
_____ % of studio trained dancers on team	_____ According to height
	_____ According to seniority

Routine Type: <i>(check one)</i> <input type="checkbox"/> Field <input type="checkbox"/> Pep Rally <input type="checkbox"/> Contest <input type="checkbox"/> Spring Show <input type="checkbox"/> Other _____	Preferred Instructor: #1 _____ #2 _____ Song/Music: _____ Artist/Arranger: _____ <i>*Be sure to use a SEPARATE tape/cd for each song.</i> _____ # of formation changes _____ # of 8's to use for a form change	Elements to Include: <i>(check all that apply)</i> <input type="checkbox"/> Parts <input type="checkbox"/> Contagions <input type="checkbox"/> Levels <input type="checkbox"/> Floor work <input type="checkbox"/> Partners <input type="checkbox"/> Sections <input type="checkbox"/> Stunt <input type="checkbox"/> Other _____ Please emphasize: <i>(check all that apply)</i> <input type="checkbox"/> Technique <input type="checkbox"/> Showmanship <input type="checkbox"/> Precision <input type="checkbox"/> Discipline <input type="checkbox"/> Energy <input type="checkbox"/> Teamwork <input type="checkbox"/> Placements	Skills to Include: <i>(check all that apply)</i> <input type="checkbox"/> Leaps <input type="checkbox"/> Kicks <input type="checkbox"/> Fan Kicks <input type="checkbox"/> Turns <input type="checkbox"/> Axels <input type="checkbox"/> Splits (Left or Right) <input type="checkbox"/> Jump Splits <input type="checkbox"/> Y-scale <input type="checkbox"/> Russians/Leap in 2nd <input type="checkbox"/> Fouettes <input type="checkbox"/> Turning C <input type="checkbox"/> Attitude <input type="checkbox"/> Stationary Leap <input type="checkbox"/> Other _____ Skills to Avoid: _____ _____ _____
Routine Style: <i>(check one)</i> <input type="checkbox"/> Pom <input type="checkbox"/> Jazz <input type="checkbox"/> Kick <input type="checkbox"/> Military <input type="checkbox"/> Lyrical <input type="checkbox"/> Novelty <input type="checkbox"/> Hip Hop <input type="checkbox"/> Modern <input type="checkbox"/> Prop <input type="checkbox"/> Other _____	Costume/Uniform Description: _____ _____ _____ _____		

EMAIL MUSIC FILES/QUESTIONS TO: Jesse@HTEDance.com

FAX TO: 972-444-9129

*Be sure to make a copy of this page for EACH routine to be choreographed.
Also, remember to email all of your music to the email address above! Choreography request are met after we receive your music email!!!
Use back of this sheet for any additional comments or requests you may have.*