

# Ballet Idaho *The Nutcracker* Audition and Rehearsal Form



Student Name: \_\_\_\_\_ Age as of Sept 1: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Height: \_\_\_\_\_ ft \_\_\_\_\_ in \_\_\_\_\_

Please list any siblings auditioning for *The Nutcracker*:

Sibling 1: \_\_\_\_\_ Role: \_\_\_\_\_

Sibling 2: \_\_\_\_\_ Role: \_\_\_\_\_

Sibling 3: \_\_\_\_\_ Role: \_\_\_\_\_

Parent/Gaurdian Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Mobile) \_\_\_\_\_

E-mail: \_\_\_\_\_

Ballet School currently attending: \_\_\_\_\_

Years of dance experience: \_\_\_\_\_

Audition notes

**Please list any conflicts and dates you may have during rehearsal schedules and all performance schedules. Only emergencies will warrant changes in performance dates. No changes will be made after November 1<sup>st</sup>, 2007:**

**If you have already purchased *The Nutcracker* tickets through a season subscription, please circle for which show:**

Friday Dec. 14, 8 p.m.    Saturday Dec. 15, 2 p.m.    Saturday Dec. 15, 8 p.m.    Sunday Dec. 16, 2 p.m.

<b>Auditioning for:</b>	Mouse	Angel	Dragon	Ladybug
<b>(Circle for each part)</b>				
	Soldier	Party Scene	Waltz of the Flowers	
No. of parts auditioned for _____ x \$20 = \$ _____				
Form of Payment: Cash    Check# _____				
Credit Card # _____ Exp Date _____ / _____				

\*Please read the following information and initial each:

- \_\_\_\_\_ A non-refundable fee of \$20 is due for *each* auditioned part.
- \_\_\_\_\_ Students may be cast in one or all of the performance dates: Fri., 12/14, 8pm; Sat., 12/15, 2 & 8pm; Sun., 12/16, 2pm.
- \_\_\_\_\_ All casting decisions are made solely by the artistic staff of Ballet Idaho and are final.
- \_\_\_\_\_ Rehearsals are mandatory; missing a rehearsal may result in losing a part.
- \_\_\_\_\_ If you have concerns about any of the above, please discuss with staff or faculty before auditioning.

**\*If you are interested in volunteering for any of the following, please circle:**

Backstage Chaperone                      Boutique                      Rehearsal Assistance                      Photos                      Refreshments

**PAYMENTS:** Payments are due on the due date. Payments received more than ten (10) days after due date will be subject to a ten dollar (\$10) late fee. If your account is not current, your child may not be permitted to attend class or participate in performances. Performance fees and registration fees are non-refundable. Following the second week of a student's attendance at Academy classes, there are NO refunds, credits or transfers of tuition payments. Ballet Idaho cannot guarantee that there will be no changes in staffing during a given term. Should it become necessary for your child to withdraw from the training program at Ballet Idaho Academy, please notify the Academy Director of your decision IN WRITING, and make arrangements regarding the settlement of your account. In the event of an individual circumstance involving prolonged illness or injury, Ballet Idaho may consider a refund on a case-by-case basis. You may be asked to provide written verification from a physician.

**MEDICAL CONSENT:** In the event of injury, I hereby authorize the program officials of the Ballet Idaho Academy to arrange for medical services as may be deemed reasonable and necessary to the welfare of the injured, and I do hereby release the Ballet Idaho Academy and all others from all liability in taking action, including all action which may be contrary to personal religious beliefs. I, the undersigned, have read this Release and Consent to medical treatment and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

**LIABILITY RELEASE:** I do hereby agree to release the Ballet Idaho Academy and all other cooperating agencies, employees, officials, or managers thereof, from all liability for damages by reason of injuries or property damages that may be sustained as a result of participation in this program.

**PHOTO RELEASE:** I, the undersigned, hereby give Ballet Idaho, its agents, and/or assignees permission to use the photographs, motion pictures or any reproductions of the above student's physical likeness taken of me in any manner it deems proper. I relinquish all rights, title, and interest I may have in the finished pictures, negatives, and copies. I waive the right of prior approval to any finished products, advertising copy, or other matter or use that may be applied, and hereby release Ballet Idaho, it agents, and/or assignees from any and all claims from damages of any and all kinds based on the use of said material. I hereby warrant that I am a parent or legal guardian of the subject of photography, who is under eighteen years of age, and am competent to act in his/her behalf insofar as the above is concerned.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_