

ALLEN CIVIC BALLET
NUTCRACKER AUDITIONS

WHEN

Saturday, August 17th
Ages 5-8, 10:30-12:30
Ages 9-12, 12:30-2:30

And

Saturday, August 24th
Ages 5-8, 10:30-12:30
Ages 9-12, 12:30-2:30

WHERE

The Allen Conservatory of Dance at 602 E. Main St, Suite E in Allen

WHAT TO WEAR

Bloch tights in T0981G Pink (required for Nutcracker Performance)
So Danca SD16 in Light Pink slippers (required for Nutcracker Performance)
Solid colored leotard (nude for under costume at performance)
Hair in a bun, short hair with a headband (required for Nutcracker Performance)

WHAT TO BRING

\$10 audition fee due at the beginning of the audition.
A headshot (facial) photograph of your dancer in 4X6 size.
Your completed and signed Audition Form.
Your completed and signed Dancers Agreement.
Your completed and signed Waiver.

REHEARSAL TIMES

Rehearsals will be held on Saturdays between 9:00am and 2:00pm at the Allen Conservatory of Dance beginning September 7th.

PERFORMANCE DATES

Saturday, December 21 and Sunday, December 22 at the Performing Arts Center at Allen High School.

Casting will be announced immediately after each audition. To participate in Nutcracker, you must formally accept your role by submitting your signed agreement and Nutcracker fees within one week after your audition.

Please call 972-727-5959 for additional information. We look forward to working with you!

Allen Civic Ballet
Nutcracker
Dancer's Agreement

1. Dancers should be taking at least one ballet class per week for dancers ages 5-8, and at least two ballet classes per week for dancers 9-12 (not on pointe) The Nutcracker is a classical ballet that requires a certain proficiency in that art.
2. Rehearsals will take place at the Allen Conservatory of Dance at 602 E. Main St., Suite E in Allen, Texas, on Saturdays between the hours of 9:00am and 2:00pm. Rehearsals begin on September 7th.
3. You are allowed to miss a maximum of two rehearsals. You will be removed from the cast at your third missed rehearsal. (Please note that there will be no rehearsals on Saturday, November 30th.)
4. There will be a dress rehearsal at the Performing Arts Center at Allen High School on Saturday, December 21st. Attendance at dress rehearsal is mandatory. Dancers not present at this rehearsal will be removed from the ballet.
5. There will be one performance on Saturday, December 21st and one performance on Sunday, December 22nd. You must perform at both shows.
6. There is a non-refundable rehearsal fee of \$100, due at the time you accept your role (up to one week after your audition)
7. There is a non-refundable costume fee of \$25, due at the time you accept your role (one week after your audition). Dancers are responsible for their own shoes and tights and must be dress code compliant (see website: www.allenconservatoryofdance.com)
8. You will need to perform one volunteer duty. Work at our boutique, stay backstage with the dancers for one performance, check in/out dancers etc.

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TO BE FILLED OUT BY ALLEN CIVIC BALLET STAFF

Dancer's Name: _____

Has been cast in the role(s) of: _____

.....
By my signature I affirm that I understand and agree to the terms of the above agreement.

Signature: _____ Dancer's Name: _____

Date: _____

Allen Conservatory of Dance, LLC

Home Of The

Allen Civic Ballet

RELEASE FORM

Student Name _____ Sex _____ Age _____ Date of Birth ____/____/____

Address _____ (Street, City, State, Zip)

Mothers Name _____

Fathers Name _____

Home Phone # _____ - _____ - _____ Work Phone _____ - _____ - _____

Cell Phone _____ - _____ - _____

Preferred Email Address _____

Emergency Contact and Phone Number _____

Are there any medical conditions or food allergies to which we should be alerted?

ACKNOWLEDGEMENT OF RISK AND WAIVER OF LIABILITY

As the parent/legal guardian of _____, I hereby consent to aforementioned person participating in Allen Conservatory of Dance, LLC's (ACD) and Allen Civic Ballet's (ACB) programs. I recognize the potential for injuries which may occur in any activity involving motion. I understand that it is the express intent of ACD/ACB to provide for the safety and protection of my child and, in consideration for allowing my child to use the facilities, I hereby forever release ACD/ACB or its employees. As legal guardian of the aforementioned person, I hereby agree to individually provide for the possible further medical expenses which may be incurred by my child as a result of any injury sustained while training at, or performing for ACD/ACB. This acknowledgement of risk and waiver of liability, having been read thoroughly and understood completely, is signed voluntarily as to its content and intent.

Parent or Legal Guardian's Signature

Date

I hereby grant the Allen Conservatory of Dance (ACD) and Allen Civic Ballet (ACB) and/or any of the authorized photographers and videographers permission to photograph and/or videotape me/my child during performances, classes, or otherwise during any event, and to use my/my child's likeness for broadcast or for use in any or all public relations and/or marketing efforts on behalf of ACD/ACB. I understand that I will not receive or be entitled to any form of compensation if ACD/ACB uses my/ my child's likeness for any form of broadcast, marketing, or any other purpose, and I willingly give my consent in return for being allowed to participate in classes and performances.

YES _____ NO _____

Parent or Legal Guardian's Signature

Date

**ALLEN CIVIC BALLET
NUTCRACKER 2019
AUDITION FORM**

Dancers Name: _____

Date of Birth: _____

Height: _____

Parent/Guardian Name: _____

Email Address: _____

Phone #s: _____

Where and for how many years have you studied ballet:

Dance Classes Enrolled in For 2019-2020 Year:

Please provide us with an email address of the dance school you are attending (if not ACD) where we can confirm your enrollment.

Dates Dancer Not Available:

Parent/Guardian Signature

Date