



## **NUTCRACKER AUDITIONS 2021**

### WHEN

Saturday, August 7<sup>th</sup>  
Ages 5-8, 10:30-12:30  
Ages 9-12, 12:30-2:30

And

Saturday, August 14<sup>th</sup>  
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

Pink tights, Pink ballet slippers, solid colored leotard, Hair in a bun (short hair use a headband)  
If you are investing in new tights and shoes, please refer to the Dancers Agreement page for our dress code.

Adults wanting to participate in the Party Scene need not audition. Please complete an audition packet and turn it in no later than August 30<sup>th</sup>. No fees need to be paid.

### 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 9:00 am and 2:00 pm at the Allen Conservatory of Dance beginning September 4th.

### PERFORMANCE DATES

Saturday, December 18th and Sunday, December 19th at the Performing Arts Center at Allen High School.

Casting will be announced within 48 hours after each audition via email. 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!



# Nutcracker 2021 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 4th.
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 27th.)
4. There will be a dress rehearsal at the Performing Arts Center at Allen High School on Saturday, December 18th. 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 18th and one performance on Sunday, December 19th. 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. You will need to perform one volunteer duty. Work at our boutique, stay backstage with the dancers for one performance, check in/out dancers, or work as stage crew etc.
8. 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. Must have nude leotard to wear under costumes at performances.
  - **Ballet Shoes:** So Danca SD16 in Light Pink
  - **Convertible Tights:** Bloch (Adaptatote) T0935L in Pink
  - **or Footed Tights:** Bloch (Endura) T0981G in Pink Child or T0981L in Pink Adult
  - **All Party Scene** So Danca SD16 in black for performances and a tea length circle skirt for rehearsals  
Adults – black character shoes

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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



## NUTCRACKER 2021 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:

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Dance Classes Enrolled in For 2021-2022 Year:

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Dates Dancer Not Available:

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Parent/Guardian Signature

Date