

Height: \_\_\_\_\_ feet \_\_\_\_\_ inches

Conflict Sheet Rec'd \_\_\_\_\_

Number \_\_\_\_\_

### Ballet Midwest Nutcracker Audition Form

All dancers, except adult party guests, are required to take ballet classes weekly, as well as attend rehearsals through the Nutcracker performance.

**DANCER INFORMATION:** (Please Print)

Dancer's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Dance Training: \_\_\_\_\_ Dance School: \_\_\_\_\_ Were you in Nutcracker last year?  
# of yrs YES NO

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

E-mail: \_\_\_\_\_ Home phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Academic school: \_\_\_\_\_ Grade: \_\_\_\_\_

**PARENT CONTACT INFORMATION:** (We will be using this information to keep you informed throughout the Nutcracker process. Please list the email you check at least once a day. **Please print neatly.** )

Parent/Guardian name: \_\_\_\_\_ Primary e-mail \_\_\_\_\_

Place of employment: \_\_\_\_\_ Home phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent/Guardian name: \_\_\_\_\_ Primary e-mail \_\_\_\_\_

Place of employment: \_\_\_\_\_ Home phone: \_\_\_\_\_ Cell: \_\_\_\_\_

**Additional family members in Nutcracker:**

\_\_\_\_\_

**Liability Waiver/Photo Release**

IN CONSIDERATION OF ALLOWING \_\_\_\_\_ to audition for The Nutcracker Ballet, I, the undersigned, for Myself, my Executors, Administrators and Assigns, agree to forever release and discharge BALLETT MIDWEST, INC., its officers and directors, from any and all liabilities and claims for damages that might arise from said audition and from subsequent Nutcracker Ballet practices and performances.

Photo/Video Release As the auditioning participant and/or the parent/guardian of the participant, I authorize BALLETT MIDWEST, INC. and/or its representatives, agents or employees to photograph and/or videotape and use any photograph/likeness of me or my minor child for historical or promotional purposes.

By auditioning for Ballet Midwest's Nutcracker, I acknowledge that casting is at the sole discretion of the artistic staff and that I will accept the role(s) for which I am cast and will be available for all performances that my cast is called for.

**For dancers cast in the production a participation fee of \$25 per dancer (maximum of \$50 per family) will be due at the mandatory Parent Meeting in September. This fee is REQUIRED for EVERY dancer/family in the production. If you have any financial issues, please contact Ballet Midwest's treasurer.**

\_\_\_\_\_  
Dancer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature (must sign for dancers under 18)

\_\_\_\_\_  
Date