



DANCE UMBRELLA
SOUTH COAST OREGON

THE NUTCRACKER

2016 Participation Agreement

AUDITIONS WILL BE HELD SUNDAY SEPTEMBER 11TH

Pacific School of Dance
303 D Street Coos Bay, OR 97420

FORM MUST BE SIGNED AND SUBMITTED BEFORE AUDITION

Forms may be submitted prior to the audition by mail or drop box at Pacific School of Dance or 30 minutes before set audition time. Please return this form with the application fee of \$10 cash or check made payable to Dance Umbrella for South Coast Oregon (DUSCO)

By mail:

Dance Umbrella for South Coast Oregon
PO Box 1171, Coos Bay, OR 97420

Dropped off:

DUSCO box @ Pacific School of Dance
303 D Street, Coos Bay, OR 97420

Dancer Name: _____ **Birthdate:** _____

Parent/Legal Guardian: _____

Home Phone #: _____ **Cell #:** _____

***e-mail** _____

Mailing Address: _____

Auditioning for: **Waltz** **Party Children** **Bon Bon** **Angel** **Baby Mouse**

I am enrolled in _____ **@** _____
(level of ballet or pre-ballet class) (name of dance school)

I have taken _____ **years of ballet (not including this year) &** _____ **years of pre-ballet.**

____ I meet all the eligibility requirements for the part(s) for which I am auditioning; age, training requirements and class enrollment.

____ I agree to accept any role (including understudy) in which I am placed.

____ I understand that I must attend all rehearsals to dance in the performance(s).

By signing this agreement, you agree that you and your child understand and commit to all information provided in the Nutcracker Information Packet.

Dancer's signature _____

Parent's or Legal Guardian's signature _____
(required)