



Audition Fee Received \_\_\_\_\_

**Capistrano Dance Company  
Competition Team 2021-2022 Audition Form  
Please return form with \$35 audition fee**

**Student Information:**

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Home phone: \_\_\_\_\_  
Parent Cell: \_\_\_\_\_ Child's Cell Phone(Optional) \_\_\_\_\_  
Birth date: \_\_\_\_\_  
Age as of today: \_\_\_\_\_ Age of child on Jan 1, 2022: \_\_\_\_\_

**Wish List**

**Competition Teams**

I would like to be considered for the following styles of team dances (circle all that apply):

*Contemporary - Tap - Jazz - Line Jazz - Lyrical - Hip Hop - Musical Theater - Production Team - Ballet*

# of Groups your willing to commit to: \_\_\_\_\_

**Competition Dances**

I would like to be considered for a (check all that apply)

Solos: \_\_\_\_\_ Duets/Trios: \_\_\_\_\_ Choreographer Choice: \_\_\_\_\_

**Comments:** Please tell us anything you would like us to know about next year. **For example:** My dancer could participate in 7 groups without a solo or 5 groups and a solo etc. Please use the space below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date



**Capistrano Dance Company**

**PLEASE HAVE BOTH THE PARENT AND DANCER INITIAL THE BELOW STATEMENTS:**

Parent      Dancer

1. I agree to trust the judgement of my teachers and coaches in my team placements

2. I agree to audition with the understanding that I MAY NOT MAKE all the teams I would like to be on.

3. I agree to audition with the understanding that I MAY MAKE the teams that were not in my top 3 preferences.

4. I agree to commit to a team potentially without knowing who the other dancers are on the team.

5. I agree that I have added up the fees and have written down the accurate number of teams I can afford to be on.

6. I agree to be at ALL REHEARSALS AND PRACTICES in a timely manner.

7. I agree to keep all my grades and school work up.

8. I agree to manage my time wisely so I can be at all scheduled rehearsals and practices.

9. I agree that NATIONALS ARE NOT optional. I will financially prepare for the additional expense & block those dates off on my calendar and NOT schedule anything during that time or 1 week prior.

10. I agree to HAVE FUN in this audition process and realize that my team placement does not change the kind of dancer I am!!!



## WAIVER AND RELEASE FROM LIABILITY

I recognize and expressly agree that participating in any sport or activity associated with athletics or dance is a dangerous activity. Further, I recognize that certain safety precautions must be followed, yet even strict adherence to those procedures does not guarantee nor does Capistrano Academy of Dance, Inc./Capistrano Dance Company guarantee Participant's safety.

**Waiver and Release from Liability:** In consideration of permission to use, today and on all future dates, the property facilities, staff, equipment and services of CAPISTRANO ACADEMY of Dance/Capistrano Dance Company. I, for myself, my heirs, personal representatives or assigns, do hereby release, waive discharge, and covenant not to sue CAPISTRANO ACADEMY OF DANCE, Inc./Capistrano Dance Company its directors, officers, employees and agents from liability **from any and all claims including the negligence of Capistrano Academy of Dance, its officers, employees and agents,** resulting in personal injury, accidents or illnesses (including death), and property loss from, but not limited to participating in activities, classes, observation, and use of facilities, premises, or equipment.

**Assumption of Risks:** Participation by its very nature carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains, to 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions, to 3) catastrophic injuries including paralysis and death.

**I have read the previous paragraphs and I know understand and appreciate these and other risks that are inherent in the activities made possible by Capistrano Dance Company. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.**

**Indemnification and hold Harmless:** I also agree to INDEMNIFY AND HOLD Capistrano Academy of Dance Inc., /Capistrano Dance Company HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities including attorney's fees brought as a result of my involvement at Capistrano Academy of Dance/Capistrano Dance Company, and to reimburse them for any such expenses incurred.

**Severability:** The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

**Publicity:** I understand that on occasion, CAPISTRANO ACADEMY OF DANCE, Inc./Capistrano Dance Company takes photographs and makes audio or video tape recordings of children and/or adults involved in dance activities. Such photographs and audio/visual recordings may be used in Capistrano Dance Company publications promotional materials, and pertinent website. I understand that such contemplated photos will have not addresses or identifications of any sort on such photos and are considered the property of Capistrano Academy of Dance Inc and may not be sold or reused. I agree to use of any such audio or visual recording or visual recording to be used, distributed as administrators of Capistrano Academy of Dance see fit. This consent includes but is not limited to: photographs, videotape, and audio recordings.

**Acknowledgement of Understanding:** I have read this waiver of liability, assumption of risk, publicity notification, and indemnity agreement, and fully understand its terms and **understand that I am giving up substantial rights including my right to sue.** I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

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Print Name of Parent

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Date

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Parent Signature