

**Capistrano Academy of Dance, Inc.**

**Recital Agreement 2020-2021 Dance Season**

Today's Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CAD Dancer's Full Name: (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CAD Dance Parent's Full Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. The Capistrano Academy of Dance student name above will perform in the June 2021, Dance recital, as well as attend any scheduled rehearsals. \_\_\_\_\_\_\_\_(Initials)
2. I agree to purchase recital costumes for the following classes. If my dancer's costume list changes any time before February 1, 2021, then I understand that I will need to fill out a brand new class list form. If I do NOT fill out a new form, then I understand that CAD may order an incorrect costume for my dancer. If an incorrect costume is ordered I know that CAD is not held responsible and that I am responsible for the

expense. \_\_\_\_\_\_\_ (initials)

**LIST OF CLASSES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CLASS** | **DAY** | **TIME** | **Costume Size** | **FEES** |
| **RECITAL REGISTRATION FEE\*\* PER FAMILY** |  |  | **PLEASE CIRCLE ONE** | $60.00  PER FAMILY |
| 1. |  |  | CHILD / ADULT |  |
| 2. |  |  | CHILD / ADULT |  |
| 3. |  |  | CHILD / ADULT |  |
| 4. |  |  | CHILD / ADULT |  |
| 5. |  |  | CHILD / ADULT |  |
| 6. |  |  | CHILD / ADULT |  |

Total Number of Costumes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total: Costume Fees + Recital fee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Amount you are paying today(half or full)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Form of Payment: Cash Check Credit Card**

1. ALL fees for costumes and registration need to be Paid In Full by March 15, 2021. Otherwise a late fee of $15 will be added for every 10 days the balance is not paid. Dancer's will not receive their costumes and may not participate in the recital if all fees are not paid. **No refunds will be given for outstanding balances owed if I decide to withdrawal from the recital after I have turned in my agreement.** \_\_\_\_\_\_ (initials)
2. I agree that I will need to order tickets for all performances that I want to attend via the online ticketing system TUTUTIX. All tickets are non-refundable. If later I decide that I do not need all the tickets I purchased it is then my responsibility to find buyers on my own. \_\_\_\_\_\_\_(initials)

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**FOR OFFICE USE ONLY**

Family Total:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Amount Due: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NOTES:**

1. I/We fully understand the risks involved associated with participation in dance. I/We hold harmless and assume such risks, and responsibility for the losses and /or damages following such injury or disability however caused or alleged to be caused in whole or in part by negligence of Capistrano Academy of Dance, Capistrano Dance & Performing Arts, its members, event hotels, Irvine Unified School District, other participants, their officers, directors, agents, and employees. This applies to the danger as well as to any guests, siblings, grandparents, etc. attending the rehearsals and/or performances. \_\_\_\_\_\_\_(initials)
2. When a dancer registers for the recital a $60 recital fee is due at that time. (Registration fees paid last year will roll over to this year) Final deadline for Recital Agreements are due by December 15, 2020. First costume payment is due January 15, 2021. All fees need to be paid in full by March 15th, 2021. \_\_\_\_\_\_\_(initials)
3. I agree not to bring or use any flash photography to ANY of the Capistrano Academy of Dance recital performances. It is also my responsibility to inform any family or friends that are attending the RECITAL of this rule. \_\_\_\_\_\_\_\_(initials)
4. Dress rehearsals for the CAD recital are mandatory. It is my responsibility to bring my dancer on time/early to each dress rehearsal and performance. CAD will not stop a rehearsal or show for missing dancers. If my dancer does not make a dress rehearsal, then they jeopardize their spot in the recital and will be removed with no refunds given. If there is an extenuating circumstance, management needs to know immediately for approval (BEFORE REHEARSAL). \_\_\_\_\_\_\_\_(initials)
5. I understand attendance is important for the success of my dancer. If my dancer misses more than 2 classes for the month of May and June they MAY be pulled from the recital **without refunds.** This is to ensure that they will have a positive dance experience. \_\_\_\_\_\_\_(initials)
6. If I move, I understand that CAD is not responsible for mailing costumes, videos or photos to me. It is my responsibility to pick up these items. If the costume, video or photos are left for more than 90 days then the items becomes the property of CAD. \_\_\_\_\_\_\_(initials)
7. I understand that attendance to the recital picture day is mandatory BUT I do not have to purchase any of the pictures. \_\_\_\_\_\_\_\_ (initials)
8. I understand alterations for the costumes are my responsibility and at my expense. \_\_\_\_\_(initials) Please Note: Not all costumes need alteration however at certain times, alterations are needed
9. No costume will be ordered or changes made after March 1st, 2021 . \_\_\_\_\_\_\_\_ (initials)
10. Recital Costume Prices: \_\_\_\_\_\_\_ (initials) \*\*In addition to costumes there is a $60 registration fee.

Child Costumes: $85/per costume

XL Child & S/M/L Adult Costume: $115/per costume

**\*\*All Preschool and ballet/tap combo classes require 2 costumes**

1. I understand that I will NEED to buy the required BLOCH pink and/or BLOCH light tan tights for my costumes. \_\_\_\_\_\_\_\_\_ (initials)

**By signing this form I understand and I agree to all of the stated Terms & Conditions of the Capistrano Academy of Dance's Recital Agreement.**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature of above named student