

LEBC

Lake Erie Ballet Company

NUTCRACKER AUDITION FORM

Audition # _____

- Please print and bring to Audition

Dancer Name _____

Dancer Email Address _____

Parent Name _____

Parent Email Address _____

Age (as of Audition) _____ Birth Date _____ Height in Inches _____

Grade & School Name _____

Dancer Phone _____ Parent Phone _____

Address _____

Years of Ballet Training _____ Years on Pointe _____

Current Ballet Classes & Teachers _____

Have you auditioned for Lake Erie Ballet Nutcracker before? _____

If you could choose, what role(s) would you like to perform: _____

____ I understand that there is a Mandatory Performer/Parent Meeting Sept. 21 at 2:00pm at Sovereign Ballet, 2539 West 12th St., Erie, PA.

____ By attending the Nutcracker audition, I agree that if chosen, I/my dancer will accept, rehearse & perform any role given.

____ I understand there is required fundraising as part of participating in this performance. (\$75 per dancer/\$125 per family)

Dancer (over 18)/Parent/Guardian Signature _____

Date _____

USE BACK SIDE TO COMMUNICATE CONFLICTS

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NUTCRACKER REHEARSAL CONFLICTS

Please list the reason for conflict beside date listed. Dancers must be present for first and last 3 weeks of rehearsals. Refer to Handbook for rehearsal starting dates.

September 23-29 _____

September 30-6 _____

October 7-13 _____

October 14-20 _____

October 21-27 _____

October 28-3 _____

November 4-10 _____

November 11-17 _____

November 18-24 _____

November 25-31 _____

_____ **If you/your dancer plan to be present for ALL rehearsals, indicate by initialing.**

Dancer (over 18)/Parent/Guardian Signature _____