



# *Limited Edition Academy*

You Are Talented Beyond

# *Measure*

*Let's use it for Good*

**1 Corinthians 12**

Registration Mandatory:  
Call or Email

## *Audition Today For*

Technical support, fundraiser, performer (drama, song, dance), choreographer, instructor, writer, Audio/video technician, recording, staging, graphic artist, web designer, grant writer, administration, marketing, advertiser, counselor, encourager, and a whole host of other vital roles.

# LIMITED EDITION ACADEMY

## PARTICIPANT APPLICATION \* *You Are Appreciated*

App Code \_\_\_\_\_

ABOUT THE PARTICIPANT: Please Print ALL Information In Blue or Black Ink.

NAME		Nickname	
RESIDENTIAL ADDRESS			
CITY/STATE/ZIP		CA	
MAILING ADDRESS		CITY/STATE/ZIP	
CONTACT PHONE		2ND PHONE	
DATE OF BIRTH		GENDER	
Ethnicity		Email	
EMERG PERSON		EMERG PHONE #	
HEALTH CARE PROV and Policy No.			

### TERMS AND AGREEMENT

BY SIGNING THIS FORM, YOU ACCEPT THE TERMS, POLICY, AND AGREEMENT OF LIMITED EDITION ACADEMY. and its' affiliates, hereinafter referred to as "LE." You or the legal guardian(s) of are referred to as "I, my, me."

*(The information listed below will be in your user manual and will be updated at any time, without prior notification.)*

**If Applicable AUDITION:** It is required that each performer provide judges a 3-minute routine of the performer's choice reflecting the field in which the performer wishes to excel. I understand that I may, in fact, audition with other parties. All parties must sign this form. LE reserves the right to cast at its discretion, for/from any act, any individual to perform with our company. If I perform in a group, and a person is selected from the group, the group itself may not necessarily be selected. After my performance, I will be scheduled for an interview by LE staff, agree to a background review and final selection. It would be a good idea to maintain all identifying internet (social media), data, and communications professionally appropriate to LE's mission, vision, beliefs, image and reputation, at all times.

**PARTICIPATION:** It is also understood that I will be required to attend rehearsals consistently, perform/work specific events as scheduled, acquire a work permit if under 18 years of age, and maintain no less than a B average in primary/secondary school. I understand that if should obtain 3 unexcused absences, I can be terminated and may have to reapply as a new participant, forfeiting any position attained or expenses.

**COMPENSATION:** It is understood that if I am selected by LE, I will become a volunteer performer. Most performances will be voluntary for the client, yet mandatory for our company. Some performances may be paid performances. It is those who show loyal interest that benefit from the paid performances. The goal is to build the company and ultimately be able to pay our performers. Our performers spend most of their time perfecting their craft while experiencing the stage life and exposure. I also understand that monies earned are subjected to deduction of any outstanding balances due to LE, and if under 18 years of age, 15%-25% will be issued to their Coogan account, and the balance thereafter will be issued to both parent/guardian and/or performer.

**MEDICATION:** It is LE's policy that NO staff member can administer medications to performers/volunteers/etc... If I/my child needs medication at a specific time, and that time is during rehearsal, showcase, or working hours, I/my child will be excused without disturbance or hesitation. If my performer is not able to administer their medicine, I must be available to do this for him/her. If during a field trip, it is made impossible for me to assist him/her, I can assign a member of management to do so with written approval, however, I hold LE harmless in the exercise of this authority. I acknowledge and understand that participants in LE may sustain serious, catastrophic physical injury, illness and/or death by participating. I assume the risk and responsibility of such injuries, illnesses and/or death and agree to participate.

**EMERGENCY:** It is LE's policy that parents/performers provide current and accurate emergency medical information and authority in the event of an accident. In case of an emergency, LE will give my emergency medical information to any emergency medical technician summoned, physicians, staff and/or officers involved. Determinations for transportation will be at the discretion of LE staff. The names that I provide on the emergency portion of this form will be contacted in the order I place them. It is my responsibility to ensure that I provide the current information on each person.

**FIELDTRIP/VISITING PERFORMANCES:** Field trips are scheduled for a variety of reasons but mostly for fun. LE expects the same behavior as at rehearsals and showcases, and implements a Zero Tolerance policy for negative behavior. LE fully complies with the facility rules and policies and hopes to enjoy our stay and be welcomed back. Negative behavior may cause me to be immediately removed and require transportation. If my removal includes law enforcement, I will require transportation. I understand that it is LE's discretion which activities I will participate in. However, there is NO participation without this signed form, GPA of >3.0 or paid balances. Transportation is not guaranteed and when it is provided, it's for employees and performers only.

**HOLD-HARMLESS WAIVER:** I agree to indemnify and hold LE, the facility, staff, representatives, administrators, and affiliates harmless from any and all claims, demands, lawsuits, actions of any kind, for damages, losses, judgments, amounts paid in settlement, costs and expenses (including attorney's fees) for all injury, illness, death to persons and property sustained by participating in any capacity including but not limited to Field Trips and Transportation which may be incurred or arise out of participating and release LE from any medical and legal, or any cost which may arise due to any of the aforementioned. I understand that LE may have no insurance.

**COPYRIGHT:** Any performance performed for, with, or in accompany with LE/LE Performing Arts, and its affiliates are the rights of LE, Co., unless so stipulated otherwise by written notarized contract. I waive any right to my image, voice, photograph, scans, or such the like or likeness being used in conjunction with LE. I must turn in all LE materials when due and upon termination. I will not share LE materials with any person other than LE members. Parents are considered honorary members and as such, abide by the same policies as stated herein. All rights are reserved.

**NONDISCLOSURE AGREEMENT:** Materials received while participating in LE are the property of LE and I agree to keep confidential, will not share, sell, present as my own, or misuse in any way, or be subject to legal consequences.

**USE OF IMAGE:** I hereby irrevocably consent to and authorize the use of my image or likeness, or name, on any photographs, videos, voice recordings, or media taken of me, and its reproduction, for use by LE. I also waive the right to inspect/approve said product or reproductions.

**TERMINATION:** I understand that I can terminate this agreement by written, notarized request sent by USMail with signature proof of Delivery which will serve as the effective date; however any pending scheduled or active event will void said termination agreement. LE reserved the right to terminate this agreement at any time, without notice or cause. Any mark-out, error in transmission, redaction or similar type markings voids this agreement. LE reserves the right to refuse my participation and LE's participation in any event for any reason.

Signature of parent/guardian or performer age 18 or older

Print Name of parent/guardian or performer age 18 or older

Date

<small>ID Verification By: DUFB (#/S/Exp) Print:</small>	
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**LIMITED EDITION ACADEMY**  
 Where Success Is Contagious  
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