



Marie Chong, Artistic Director

**COMPANY Audition
Registration**

Date: _____

No.: _____

Name:

(please print)

Contact Phone: (____) _____ - _____

Address:

E-mail: _____

(please print clearly)

Citizenship: _____

Gender: F / M Date of Birth _____

Professional Dance History:

Please list ALL professional experience. Use back if more space is needed. Attach resume, photo, and recommendation.

Warranty and Release

By signing below, I agree to the following waiver and release. I acknowledge that I am physically fit and have no health, medical or physical problems that preclude my participation in the activities of ARC Dance Productions and Arc School of Ballet. I understand and acknowledge these activities may require special conditioning and skills and involve risks that may include serious bodily injury, permanent disability, death, and personal property damage, social or economic loss. I understand these risks may arise from any event(s), whether in or out of my control, and these risks may be unforeseeable or unknown to me at this time. I agree that it is my responsibility to examine and inspect each activity I take part in and it is my responsibility to take action to protect myself from risk if I believe risk is inherent in the activity. I fully accept and assume all such risks and all responsibilities for losses, costs and damages I may incur as a result of my participation in these activities and agree that ARC Dance Productions and Arc School of Ballet is in no way liable for any risks incurred from my participation in these activities. I hold harmless ARC Dance Productions and Arc School of Ballet, its officers, employees and agents from any and all liability, actions, and cause of action, claims and demands of any and every kind that may arise from or in connection with my participation in these activities. ARC Dance Productions and Arc School of Ballet have the absolute and irrevocable right and permission, to use, re-use, publish, and republish the same in whole or in part, individually or in conjunction with other photographs, in any medium and for any purpose whatsoever, including but not limited to, illustration, promotion, advertising and trade, any photos of myself or use of my name.

My signature serves as a release and assumption of risk for myself and any members of my family who have accompanied me to these activities, including those under the age of 18 for whom I am a parent or legal guardian. My signature shall bind my heirs and estate to this release and assumption of risk.

I have read and understand this agreement

Name: _____

(please print)

Signature: _____ Date: _____