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**NUTCRACKER 2023 Registration Form**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Dancer’s Name: | | | | | | | | | Audition Times(s): | | | | | | | |
| Age: | | Grade: | | | | DOB: | | | MBT Level: | | | | | T-Shirt Size: | | |
| Street Address: | | | | | | | | | City: | | | | State, Zip: | | | |
| Home Phone: | | | | | | | | | | | | | | | | |
| Parent/Guardian Name(s): | | | | | | | | | Father’s Phone: | | | | | | | |
| Mother’s Phone: | | | | | | | | | Father’s Email: | | | | | | | |
| Mother’s Email | | | | | | | | | Emergency Contact Name: | | | | | | | |
| Student’s Cell Phone: | | | | | | | | | Emergency Contact Phone: | | | | | | | |
| Student’s Email: | | | | | | | | | | | | | | | | |
| Audition Fee: $20 | | | | | Date Paid: | | | | | | Payment Method: | | | | | |
| Available Dates to Volunteer: | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **Roles** | **Production Fee Amount** | | **T-Shirt**  **$35**  **each** | **Digital Download**  **$35 each** | | | **Non Volunteer Fee $100**  **(if applicable)** | **Late Fee**  **$25 (if applicable** | | **Total**  **Amount Due** | | **Amount Paid** | | | **Date Paid** | **Method of Payment** |
| One Role | $230 | |  |  | | |  |  | |  | |  | | |  |  |
| Two Roles | $280 | |  |  | | |  |  | |  | |  | | |  |  |
| Three Roles | $330 | |  |  | | |  |  | |  | |  | | |  |  |
| Principal Roles | $380 | |  |  | | |  |  | |  | |  | | |  |  |
| **PHOTO SHOOT and full gallery of your dancer. Contact Jennifer Fitzpatrick at info@artistryreimagined.com** | | | | | | | | | | | | | | | | |

**ALL PRODUCTION FEES ARE NON-REFUNDABLE AND NON-TRANSFERRABLE \_\_\_\_\_\_\_\_\_ Please Initial here**

**Attendance of academy classes is mandatory \_\_\_\_\_\_\_\_\_\_\_ Please initial here**

**Attendance of all rehearsals is mandatory \_\_\_\_\_\_\_\_\_\_\_\_\_\_Please initial here**

**Attendance of warm up classes prior to rehearsals and performances is mandatory\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Please initial here**

**Signature & Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Director’s Notes:**