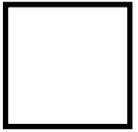


OAK RIDGE CIVIC BALLET ASSOCIATION  
P.O. Box 6185  
Oak Ridge, TN 37831  
orcba63@gmail.com | www.orcba.org

Dancer's  
Name \_\_\_\_\_  
(PLEASE PRINT)



AUCTION

NUMBER

## Performer Agreement and Consent Form Fall/Spring \_\_\_\_\_

By accepting the opportunity to perform in this **ORCBA production**, I agree to the following:

1. I will maintain a "PG" environment with my dress, words, and actions, both in and out of the studio.
2. I will be respectful, courteous and cordial to all participants.
3. I will arrive early to all rehearsals and performances, prepared to work and to grow as an ORCBA Performer.
4. I will learn my choreography and carry out my responsibilities to the best of my ability.
5. I will pay the Production Fee at the parent production meeting; the Production Fee for this show is \$125.00 for the first performer and \$70.00 for each additional performer covered by the same family insurance policy, with a maximum fee of \$265.00. Paid audition fees will be credited against the production fees.
6. I will attend all rehearsals, dress rehearsals and performances; I understand that any absence from rehearsals may result in my dismissal from the production. Should I need to miss rehearsal due to illness I will email **orcba63@gmail.com** prior to the start of rehearsal. I understand the commitment I am making to this production, and will inform the Vice President of any rehearsal and/or performance conflicts as soon as I know about them.
7. I will wear proper attire at all rehearsals - leotard and tights for girls with hair in a bun, fitted t-shirt and athletic shorts/pants for boys.
8. I will provide my own tights and shoes for performances as required by my role(s).
9. I will take good care of my costumes, and not eat or drink while wearing my costumes or while I am around others who are in their costume. I agree to be financially responsible for any damage I negligently cause to any costume.
10. I will properly dispose of any food/drink/trash brought to any rehearsal or performance.

I agree that ORCBA shall have the right to use my name, likeness, voice, photograph, and image to promote this production, future productions, and ORCBA generally, and that ORCBA may exhibit the same through any medium whatsoever including ORCBA's website and social media outlets. All such reproductions shall be the exclusive property of ORCBA.

I agree that all choreography presented by me in any ORCBA production, including any improvements or additions created by me, will be the property of ORCBA and will not to be reproduced by me without the consent of ORCBA. I understand that I am never allowed to post videos or photos of rehearsals and/or performances on any social media site, and that pictures of costumed performers and/or professional dancers may not be posted to accounts with public access without permission from the Board. I understand that candid and/or group photos of ORCBA activities or rehearsals are not allowed to be posted until after that activity has completely finished its run. I understand it is an ORCBA rule to **not** tag dancers in photos.

I agree that in the event of any injury I may sustain, ORCBA may render first aid and/or request medical treatment. I consent to ORCBA rendering first aid to me and authorizing any medical treatment deemed necessary by emergency response personnel and treating physicians.

I have the following medical conditions: \_\_\_\_\_

I routinely take the following medications: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dancer's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian's Signature  
[For dancers under age 18]