

# The Ballet Alliance Festival Attendance Form for ADULT DANCER

Return to your Artistic Director

PARTICIPANT NAME:	Birthdate:	Age:
COMPANY:		
Cell phone:		
Participant Medical Insurance Co:	Policy #:	
Emergency contact:	Relationship:	
Emergency contact telephone:		
Allergies/medical conditions:		
Dietary restrictions or food allergies:		
Date of last tetanus shot:		

## Festival Policies Agreement:

I understand the Festival Dress Code, both for classes and for other activities. I will dress appropriately for the climate and location of the Festival and within the The Ballet Alliance rules for all events. I understand that if I am not attired properly I will not be able to participate.

I will wear my Festival badge to all Festival functions.

I will attend all Festival classes and functions unless expressly excused by my Artistic Director.

I will not take part in any illegal activity, and understand that I will be prosecuted to the full extent of the law if I do so. The use of Cannabis is also prohibited.

I agree to behave in a conservative manner within the hotel and in public spaces; I understand that I represent The Ballet Alliance.

I will not deviate from my company's schedule during the Festival. I will never leave the hotel, theater or class facilities alone, nor will I ever be somewhere that a chaperone from my company does not know about.

I will behave in a dignified and supportive manner during performances, and what is expected has been fully explained by my Artistic Director.

**Use of Name and Likeness:** I hereby grant permission to The Ballet Alliance Festival 2024 May 6 - 9, 2024 for photos or videos (including of which I am the subject) to be published, reproduced and distributed in ways that include, but are not

limited to: distributed to Festival participants, used for marketing and promotional purposes, used for fundraising proposals, used for print or The Ballet Alliance website publication or social media forum. I understand that my image may not be credited.

**Indemnity/Hold Harmless Agreement:** I agree to indemnify and hold harmless and defend The Ballet Alliance Festival 2024, its sponsor organizations, agents, officers, and employees from and against any and all suits, action, claims and expenses

including attorney fees by reason of the liability imposed by law upon The Ballet Alliance, except in cases of its sole negligence, for damage because of bodily injury, including death resulting therefrom, sustained by and person or persons, or on account of damage to property arising out of this agreement.

**SIGNATURE OF DANCER OVER THE AGE OF 18:**

**DATE**

Typing my name below signifies my understanding of and agreement with the entire above charter