

# ATD Company 2020 Commitment Sheet

## Rehearsals

- I have reviewed the rehearsal schedule and can make all scheduled rehearsal dates listed:

### Sunday Rehearsals:

February 2, 9, 23 (no February 16, President's Day Weekend)  
March 1, 8, 15, 22, 29  
April 5, 19, 26 (no April 12, Spring Break)  
May 3, 10, 17, 24, 31

- I have no conflicts on any of the dress rehearsal dates – Sunday, June 7 (10-6 p.m.); Monday-Thursday, June 8, 9, 10, & 11 from 5:30-9:30 p.m.
- I understand my child is allowed **\*one\*** Emergency Absence **per piece on Sundays (no absences are allowed at the theater).**
- **Listed below are the weekend rehearsal date(s) I have a conflict with:** \_\_\_\_\_
- I have no conflicts with the potential ATD Company performance dates for 2020: **Friday, June 12; Tuesday, June 16; Wednesday, June 17 @ 7pm**
- I understand an email must be sent to company director, Moire at: [atdcompany@all-that-dance.com](mailto:atdcompany@all-that-dance.com) with "Company Absence" in the subject line, as soon as I know my child will not be attending a weekend rehearsal.
- I understand phone messages will not be checked on the weekends and that all communication must happen via email in order to reach the Company Directors.
- I further understand that if my child misses **more than one** rehearsal per piece, s/he runs the risk of being replaced by an understudy at the Director's discretion.
- It is my responsibility to have my child at the studio at least 5 minutes before scheduled rehearsal times.
- I understand it is my responsibility to get my child to and from all rehearsals.
- **Company Member:** I will be responsible for cleaning up after myself during rehearsals and keeping the studios and lobbies clean.
- **Company Members:** I will be on time (5 minutes early) to all scheduled rehearsals and if I am late more than once, I will have a job assigned to me.

Parent & Student initials: \_\_\_\_\_

## Understudy Opportunity

- I understand all dancers are eligible to be an understudy. If chosen, I agree to attend all rehearsals for that piece and agree to learn the choreography in case I am needed to perform.

Parent & Student initials: \_\_\_\_\_

## Financial

- I understand the ATD Company fee of **\$660** is non-refundable. This fee is due by **Thursday, January 30** in order to secure a spot in Company. Payment on-line is the easiest option. Please log into your family account.
- I understand ATD Company costume fees may cost **up to \$60 per piece** and the total amount due will be billed to me in May.
- I would like to limit my child's participation in the company due to financial or scheduling considerations. Circle: Yes      No      If yes, limit is: \_\_\_\_\_

Parent & Student initials: \_\_\_\_\_

## Class Attendance

- I understand if my child misses four of any one of his/her technique classes during spring semester, they will not be allowed to remain in ATD Co. and no refund for the Company fee will be given.
- I understand that while make-up classes are expected to be attended by Company members, these make-ups do not offset the absence from my child's original technique class. Any deviation from this policy is at the discretion of the Company Directors.

Parent & Student initials: \_\_\_\_\_

## Company Member Expectations

- I agree to treat my choreographers and fellow company members with courtesy and respect. Any student who exhibits repeated disrespectful behavior to choreographers or other members will be asked to leave the company and no refund for the Company fee will be given. Our Code of Conduct will be reviewed at week 1 of rehearsals.
- I will remember to bring all required shoes to all my rehearsals and will dress appropriately.
- I will accept all pieces I am cast in Company 2020 with the understanding that it will help me grow as a performer.

Parent & Student initials: \_\_\_\_\_

**Both dancer and parent have read the above rules and agree to expectations laid forth in order to participate in ATD Company:**

Student Printed Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Printed Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_