

Nease Pantherettes 2021-2022 Audition Information

Audition Information: Auditions will be held on Saturday May 22, 2021 at Nease High School in the Gymnasium. Auditions will start at 7:30am and depending on number auditioning, will run to approximately 3:00pm. Dancers will only come to auditions in small groups for approx. 45 minutes at a time. Times will be given the weekend before auditions once all applications are collected. Please clear your schedule for the whole day to be sure. *Auditions will follow all district COVID policies.*

Who Can Audition: Any student who is enrolled at Nease for the 2021-2022 school year may audition. Student must have a physical that is dated after May 21, 2020 in order to audition. Student must have a least a 2.0 GPA to audition.

Optional Audition Prep Clinics: There will be 6 optional audition prep clinics. Prep clinics will be held on campus at Nease High School after school. Clinics will focus on certain skills that dancers are expected to know for auditions and to be on the team. Clinics are \$5 a clinic, or you may pay \$20 up front to attend all 6. Payment is cash only at clinics. If paying the \$20 for all 6, make sure to have the \$20 at the first clinic. Clinic information is listed below (*Clinics will follow all district COVID policies.*):

1. Wednesday April 28 3:30 – 4:30pm – Nease Gym (will focus on turns and leaps)
2. Thursday April 29 4:30 – 5:30pm – Nease Gym (will focus on turns and leaps)
3. Monday May 3 4:30 – 5:30 pm – Nease Cafeteria (will focus on jumps and kicks)
4. Tuesday May 4 4:30 – 5:30pm - Nease Cafeteria (will focus on jumps and kicks)
5. Monday May 10 4:30 – 5:30pm - Nease Cafeteria (will focus on tricks and hip-hop)
6. Tuesday May 11 4:30 – 5:30pm - Nease Cafeteria (will focus on tricks and hip-hop)

Mandatory Audition Choreography Clinic: Anyone auditioning will be required to attend 1 mandatory audition choreography clinic. Dancers will be assigned a day to attend to limit numbers. At these clinics dancers will learn all material for the audition. (*Clinics will follow all district COVID policies.*)

1. Monday May 17 4:30 – 6:00pm Nease Cafeteria
2. Tuesday May 18 4:30 – 6:00pm Nease Cafeteria

Audition Routines: Dancers will perform 3 different routines and four 8-counts of freestyle as part of the audition process. The 3 routines will be as follows; technique pass (30seconds), sideline (30 seconds), audition routine (45seconds). Dancers will perform these routines with their audition group of 3-4 people. They will perform each routine once on the day of audition. Dancers will do four 4-counts of freestyle individually in front of their audition group. Dancers will get the freestyle song in advance so they can prepare something specific if they wish.

What to Wear: The day of auditions dancers must wear black leggings or dance pants (no biker shorts), and a fitted black top (no tube tops or crop tops). Dancers may wear tennis shoes or jazz shoes to audition. Dancers may not be barefoot (half-soles are allowed). Dancers should wear their hair in a nice neat manner and being wearing make-up similar to how they would for an on-stage performance.

What to Work on Now: As you wait for prep clinics, some skills you can work on are as follows; second turns, calypso turns, turning discs, firebird, right leaps, second leaps, headsprings, aerials, kip-ups, kick line, and pirouette (double or triple).

Dear Parents and Dancers,

Welcome panthers and future panthers interested in trying out for our 2021-2022 NHS Dance Team! I look forward to working with talented and positive students who wish to work as a team and represent our school.

With this in mind, as ambassadors of our school, dancers are EXPECTED to follow all school rules and behave appropriately, maturely and responsibly at all times. As a leader among their peers, dancers will be held to a higher standard. There are responsibilities and obligations that must be met, as a member of the Dance Team.

Academics should be a priority for all NHS Dancers. A dancer should be able to balance schoolwork and a busy dance schedule, as well as personal responsibilities. Dancers must maintain a 2.0 GPA or higher. Being a scholar-athlete is the best way to make the most out of high school. I'm proud to say for 2020 – 2021 the team average GPA was 3.4

Leadership abilities and a positive character are important qualities that each dancer must possess. The administration and faculty expect dancers to set a positive example of behavior and character not only in school but also in the community. Whether in uniform or not, an NHS dancer must exhibit the six (6) pillars of character at all times and meet all requirements as dictated by Nease Athletic Department. *Inappropriate behavior will be grounds for dismissal from the team.*

Parents are periodically asked to assist in volunteering for activities or events (selling items, preparing food, etc.) and are expected to be supportive. Parents are responsible for providing transportation to all camps, practices, fundraising events and other activities. Parents are required to provide appropriate fees and paperwork by the announced deadline. If for any reason a parent requests that a dancer be removed from the team, re-admittance will not be allowed and all paid items are not refundable. Parents will respect the decisions made by the Coach about all dance performances and formations. A parent's refusal to support this policy could reflect in a negative manner on his/her dancer. If parents have any questions or concerns, please follow the appropriate chain of command: Coach – Athletic Director – Principal.

Dancers will be expected to attend ALL scheduled home games, camps, practices, and activities. During the the school year practices will be mandatory regardless of day, location or time. Please take this into consideration before the auditions. (School year practices are Tuesday, Wednesday, and Thursday. Weekend morning practices will be held in the winter and spring prior to competition) If there is any doubt or problem with committing, please don't hesitate to email your concerns.

Thank you for your interest in the NHS Dance Team Program. If you have questions that cannot wait till auditions, please feel free to email me at amy.case@stjohns.k12.fl.us.

Sincerely,

Amy Case

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Financial Information

These fees are ESTIMATED. Returning dancers apparel cost will likely be lower, as some apparel items from this year can be used again. Exact fees and payment schedule will be presented at the first Parent Meeting. Financial payment plans are available. And of course, the goal is to fundraise more to lower costs.

Dance Team Cost:

Apparel Package:	\$235 - \$412 (returners are lower cost)
Extras (spirit gifts, team meals, outings, etc):	\$70
Banquet (Dancer + One Parent):	\$70
Golden Panther Booster Club "Pay to Play":	\$75
Choreography/Music Fee	\$20
Summer Practice Costs	\$40
Dance Team Total:	\$510 - \$687

Optional Summer Camp Cost:

National Dance Association, NDA Camp:	\$400 - \$450 (depending on dancer total)
UDA Leadership Camp (Leadership Council ONLY)	\$50 - \$150 (depending on dancer total)
Dance Team Total (with Camp):	\$905 - 1,282

ESTIMATED Competition:

Registration with hotel: \$75- \$200 (per competition)

Costuming: \$50 - \$180 (per costume)

Price will vary on number of dances girls compete (gameday, jazz)

Fundraising will lower cost dependent on how successful fundraiser is

National Dance Association Camp (NDA Camp) is optional.

Dates for the NDA Camp are July 25-28, 2021* at the Renaissance Hotel in World Golf Village. It is an overnight camp. It is HIGHLY encouraged all dancers attend as we learn routines for the season and it provides some of the best team bonding. It will also help determine which dancers will compete which dances.

THESE DATES ARE TENTATIVE. SJCSJ is still not approving overnight trips, so will confirm by end of May. Otherwise, camp will be a day camp hosted at Nease in the last two weeks of July.

Competition:

Not every girl that makes the team will be guaranteed a spot in any competition routine. It will be based on performance and skill. If you know for sure you do not want to compete for any reason, please do not let that stop you from trying out for the team.

If you have any questions,
Please email Coach Case at amy.case@stjohns.k12.fl.us

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Audition Packet Check-List

1. **Complete online application by May 14, 2021 4:00pm.** You can access the online application via the Nease Dance website (neaseathletics.com), Facebook (Nease Dance Team), Instagram (nhs.danceteam), or you may click here or scan the QR Code:

[Online Application](#)



2. **Send out teacher recommendations by May 1, 2021.** *(Due by May 14, but recommend sending out with 2 weeks for teachers to complete)* You must have 4 teacher recommendations. 2 must be from school teachers (may be current teachers or from last year). 1 must be from a current school administrator/dean/guidance counselor. The last recommendation may be either school teacher, school staff, or a dance teacher from a studio. Teacher recommendations are also online, please copy and paste links or QR code to send to your teachers.

[Teacher Recommendation](#)



3. **Complete agreement and liability form.** Please complete the Audition Agreement and Liability form in this packet. These will be turned into Coach Case.
4. **Get copy of current physical.** Per district and FHSAA policy, all student athletes must have a physical dated within the past year in order to participate in any school physical activity. Dancers must have a physical dated after May 22, 2020 in order to participate in auditions. A copy must be presented to Coach Case.
5. **Print a current colored photo.** Print a colored 4"x6" picture. This will be turned into Coach Case
6. **Print current report card.** Please print a copy of dancer's most recent report card (for SJCSD this will be the 3rd quarter report card).
7. **Turn in printed items/forms to Coach case by May 14, 2021 4:00pm.** Audition Agreement, Liability Form, Physical, Photo, and Report Card must all be given to Coach Case in an envelope with dancer's name on it. Envelopes may be mailed, dropped off to front desk or given directly to Coach Case (portable 24). **Must be turned in by May 14, 2021 4:00pm.**

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Audition Agreement

Member's (Dancer) Name (Please Print): _____

I, the parent/guardian of the above named candidate, have read all information presented in this audition packet. I acknowledge the time and financial commitment involved in this sport. I understand the Coach has final say in my dancer making and remaining on the team. I understand coach will have the ultimate decision on dancers that will compete or not. I will support the Coach's decisions when making formations and routines, I understand that my dancer will not always be highlighted or in the prime formation location. I understand I will be called upon to help (within my ability and capacity to help) in some way throughout the year. I will make every effort to do my share in assisting the dance team on behalf of my dancer. I also understand and will follow the appropriate chain of command (Coach-AD-Principal) if I have a concern or question. I agree and accept that the Coach's decisions are final.

Parent Signature: _____ **Date:** _____

As a potential member of a NHS Dance Team, I have fully read the audition packet and know what is expected of me to remain a team member in good standing. I understand that my role as a dancer goes beyond the athleticism and time commitment of the sport and that it includes the expectation that I will be a school leader of outstanding character. I will keep myself knowledgeable and informed of all the rules and I realize that the consequences of defiant behavior could result in suspension or removal from the team. Finally, I promise to respect my Dance Team Coach, my teammates, my school and all persons associated with Nease High School at all times. I will understand and respect coach's decisions regarding uniforms, routines, formations, and competition.

Dancer Signature: _____ **Date:** _____

GIVE BACK FILLED OUT

By May 14, 2021

Please place in envelope with other printed items/forms

Liability Form

STUDENT'S NAME: _____ **GRADE** _____

This application to compete in interscholastic athletics for the above high school is voluntary on my part and is made with the understanding that I have not violated any of the eligibility rules and regulations of the State Association.

I, the undersigned parent/guardian, do hereby grant permission for my child to participate in the Varsity Dance Team at Allen D. Nease High School. In order that my child may receive the necessary medical treatment in the event he/she may sustain an injury or become ill during participation in this activity, I hereby, authorize the Dance Coach, Coordinator, Athletic Trainer or any school staff member to obtain medical treatment for my child for such injury or illness during the activity, and I, hereby, hold Allen D. Nease and its representatives harmless in the exercise of this authority. I understand that there are inherent risks of physical injury in the activity of Dance Team. I further acknowledge and understand that due to the nature of this activity, which involves inversion and rotation of the body, there is a possibility that my child may sustain physical illness or injury (minimal, serious or catastrophic), no matter the precautions used, how careful the participant and sponsors are or what landing surface is used. I further acknowledge and understand that my child is assuming the risk of such physical illness or injury by her participation, and I further release St. Johns County School District, Allen D. Nease High School, its personnel, Dance Sponsors, Dance Team Members, from any personal illness/injury claims that my child may sustain during participation in this activity.

(to the parents):

I HAVE READ THE LETTER TO PARENTS /GUARDIANS CONCERNING THE REQUIREMENTS FOR BEING A DANCER. I UNDERSTAND THE COSTS, RISKS AND TIME INVOLVED.

(to candidate):

During the audition process, clinics, and if on the team; I will not attempt any moves beyond my known skill and ability that could potentially cause injury. I understand the risks of injury in dance and will share any concerns I have at that time.

DANCER'S SIGNATURE: _____

PARENT/GUARDIAN SIGNATURE: _____ **Date:** _____

Date of last physical: _____ (must be within the last 12 months)

Physician: _____

List any allergies: _____

List any current medications: _____

Are you currently being treated for any injuries? ____ If so, please list:

Are you aware of any previous injuries/health conditions that may impact your ability to perform certain skills? ____
If so, please explain.

Copy of current physical and insurance card must accompany this form when turned in

GIVE BACK FILLED OUT

By May 14, 2021

Please place in envelope with other printed items/forms