

# Mississippi Gulf Coast Community College

## *Perkette Dance Team*

### 2010 Audition Release and Wavier Liability

I, \_\_\_\_\_, have completed and submitted an application to audition for the Mississippi Gulf Coast Community College Perkette Dance Team and will participate in the audition/clinic at my own free will. I understand the inherent risk involved with dancing. I have provided personnel with proof of insurance (a front and back copy of your health insurance card). I thereby release the college and any college personnel of any and all responsibility for any injuries that may be incurred during said workshops, clinics and/or auditions.

I also give all personnel associated with the Perkette Dance Team program permission to view my academic record and information necessary to determine my eligibility to audition and become a member of the 2010 Perkette Dance Team and Band of Gold.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Emergency contact information (during audition/workshop):

Name \_\_\_\_\_ Phone \_\_\_\_\_

Please return the following to:  
MGCCC Perkette Dance Team  
Attn: Maria S. O'Keefe  
P O Box 548  
Perkinston, MS 39573

- Completed application
- Current MGCCC student ID
- Proof of insurance (front and back copy of your insurance card)
- Current photo (i.e., senior picture)