



# Dancer Contract Cover Information

2018 Rambling Road • Kalamazoo, MI 49008 • 269.345.3433

Congratulations on being accepted into Ballet Arts Ensemble. At this time, here is information that you need to complete and **return to the Artistic Assistant, Lauren Wertz:**

1. Dancer Contract (2 pages)
2. Rules and Responsibilities of Company Members (2 pages)
3. Classroom Etiquette and Rules of Conduct (1 page)
4. Medical Waiver and Release Form (2 pages)
5. Photo Imaging Consent Form (1 page)
6. Permission Form (3 pages)
7. Parent Volunteer Agreement (1 page)
8. Dancer Information Form (1 page)
9. Signature Sheet (1 page)

This is an **interactive pdf document**. You should open the document on your computer's desktop and complete each of the fields as indicated. Information that is repeated should be completed below. There are a number of **fields** elsewhere in this document **that you will also need to complete**.

Information about BAE membership is already completed (marked in **BLUE** on this page). **Do not change any of these inserts.**

Once you and your parents or guardian have **read all of the pages**, you need to **mark the box** at the end of each form. Then you and your parents or guardian must electronically sign the "Signature Page" at the end of this packet.

## Information from the BAE Ballet Mistress:

**Contract Date:** May 21, 2024

This Contract packet must be returned by **RETURN DATE: June 1, 2024**

**Dancer's First and Last Name** \_\_\_\_\_

Full or Apprentice \_\_\_\_\_ School Year **2024-25** Season Begins **June 1, 2024**

Fees: Membership **\$300.00**

Due: **June 8, 2024**

Costume **\$150.00**

Due: Fall: **September 30, 2024**; Spring: **February 24, 2025**

Fundraising **\$100.00**

Due: **May 18, 2025**. This is the audition date for the new season. No member may audition for the new season without paying their fundraising fee prior.

## Dancer is to Complete the Following Information:

Dancer's Address \_\_\_\_\_ Dancer's City / State / Zip \_\_\_\_\_

Dancer's Home Phone \_\_\_\_\_ Dancer's Cell \_\_\_\_\_

Dancer's Email \_\_\_\_\_ Dancer's Birthday \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Mother's Cell \_\_\_\_\_ Father's Cell \_\_\_\_\_

Mother's Email \_\_\_\_\_ Father's Email \_\_\_\_\_



# Dancer Contract

2018 Rambling Road • Kalamazoo, MI 49008 • 269.345.3433

This agreement is made and entered into on \_\_\_\_\_ by and between **BALLET ARTS ENSEMBLE, INC. (BAE)**, a Michigan Nonprofit Corporation with its principal place of business at 2018 Rambling Road, Kalamazoo, MI, 49008-1631 (hereinafter referred to as "Ensemble") and \_\_\_\_\_ and his/her parent or guardian if the dancer is a minor (hereinafter referred to as "Dancer").

WHEREAS, Ensemble is engaged in the instruction, promotion, and performance of ballet, and  
WHEREAS, Dancer has auditioned and been selected as a participant in Ensemble's company, and  
WHEREAS, the parties desire to reduce their understanding in writing.

WITNESSETH:

NOW, THEREFORE, in consideration of the mutual undertaking of the parties as hereinafter set forth the parties agree as follows:

1. DANCER is accepted as a \_\_\_\_\_ member of Ballet Arts Ensemble subject to the conditions herein set forth together with the established rules and regulations of the Ensemble as adopted by the Board of Directors.
2. DANCER will pay a total ENSEMBLE FEE of **\$300.00** for the school year **2024-25** by **June 8, 2024**. If Dancer resigns from the Ensemble after the first required event of the season, none of this fee is refundable. There is an additional required fundraiser fee (see section 4h)
3. DANCER will pay a COSTUME FEE fee of **\$150** divided between each production: Fall production payment is due no later than **September 30, 2024**; **Spring** production payment is due no later than **February 24, 2025**.
4. DANCER agrees to:
  - a) Commit to the full dance season from **June 2024** until the **May 2025** BAE audition date
  - b) Attend all classes, rehearsals, and scheduled performances unless prevented by illness or prior excused absence by the Ensemble Artistic Director.
  - c) Provide his/her own dance equipment as established by the Ensemble Artistic Director;
  - d) Refrain from posting any video recording (personal or professional) of Ensemble rehearsals and/or performances on all internet sites without the expressed written permission of the Ensemble;
  - e) Refrain from posting any still photos taken by professional photographers of Ensemble members on all internet sites without the expressed written permission of the Ensemble;
  - f) Comply with all other Ensemble rules and regulations which may be in effect at the time of this contract including those outlined on the separate form Rules and Responsibilities of Company Members;
  - g) Use his/her best efforts to advance the Ensemble and the art of ballet;



# Dancer Contract

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h) Help fund Ensemble programs and activities by providing spring fundraiser income equal to (or greater than) an amount set by the board each season. This may be done by participating in spring fundraisers, paying the full amount in lieu of such participation, or a combination of the two. The fundraising amount is **\$100.00** which is due by **May 18, 2025**. The BAE Board will provide several fund raising events from which you may choose.

You may opt out of this requirement by paying a **\$300.00** fee by the due of **May 18, 2025**.

No member may audition for the new season without completing their fundraising fee requirement.

i) Provide a medical permission form;

j) Enroll in **and** attend at least two (2) classical ballet classes (Intermediate II or Advanced) per week at Ballet Arts School of Dance in addition to the Ensemble company class and maintain such enrollment/attendance unless excused by the Artistic Director.

4. ENSEMBLE agrees to:

a) Provide a weekly company class;

b) Provide opportunities for Ensemble members to work with guest teachers and choreographers;

c) Provide costumes necessary for performances;

d) Provide performance opportunities for Ensemble members.

5. DANCER does, in consideration of the acceptance of the Dancer by the Ensemble, release and discharge any claim which has arisen or may arise out of Dancer's participation in the company.

6. ENSEMBLE reserves the right to terminate any Dancer from the company for inappropriate behavior or non-performance of Dancer's obligations hereunder.

7. This agreement is non-assignable by Dancer.

8. This agreement shall be binding upon and inure to the parties hereto.

IN WITNESS WHEREOF, we have hereunto executed this agreement the date first above written between Ballet Arts Ensemble, Inc. and the Dancer.

\_\_\_\_\_ Marking this box affirms that we have read and understand the *Dancer Contract*.

Signatures are on the "Signature Sheet" attached to this document.



# Rules and Responsibilities of Company Members

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Contract Date \_\_\_\_\_

## **AUDITIONS**

Auditions are held annually in the spring at the end of the season. Members are required to audition each year. Special auditions may be announced at other times.

## **SEASON PHOTOSHOOT**

All members must attend the season photoshoot that will be held on **June 8, 2024**. If member cannot attend on this date, member must provide a headshot for the season, AND understand they will not be pictured in the promotional group pictures which are taken on this day.

## **ATTENDANCE**

Members are required to attend two classical ballet classes (Intermediate II or Advanced) per week in addition to company class. **These classes must be taken at Ballet Arts School of Dance.** Members are required to attend all rehearsals as scheduled.

## **Absences**

Membership can be cancelled (at the discretion of the Artistic Director) if anyone has more than two unexcused absences from company class or Rehearsal.

## **Excused absences include:**

- ❖ Death in the family
- ❖ Religious/cultural reasons
- ❖ Serious illness

**Any absences—excused or unexcused—**may result in dismissal from a performance or a performance piece. Any missed class or rehearsal due to serious sickness or injury requires a doctor's note that is given to the Artistic Director

**Attendance at required ballet classes** (minimum two per week) will be monitored by the Artistic Director. **Snow days must be made up. Classes that are missed must be made up the following week.** The Artistic Director has the authority (at her discretion) to cancel membership if this requirement is not fulfilled.

*The Artistic Director always has the authority (at her discretion) to terminate membership or cut a member from any piece or performance for any absence.*

*There are **no** excused absences given for dress rehearsals or performances.*

## **REHEARSALS**

### **1. Company Class and Rehearsals**

These will be held every Saturday from 1:00-5:00 pm unless cancelled by the Artistic Director.

### **2. Sunday Rehearsals**

These will be scheduled from 1:00–4:00 pm on the four Sundays prior to the two productions that BAE present each year.

### **3. Additional Rehearsals**

When these are needed for individual or groups of dancers, every effort is made to schedule them at a mutually agreed-upon time.

## **DRESS CODE**

**Women** – Company leotard over footed pink tights or flesh colored tights (no bare legs), pink or fleshy colored slippers slippers and pointe shoes.

**Men** –Solid-color T-shirt or leotard, black tights with black slippers, or white socks and white slippers.

**All** – Warm-up clothing is allowed only with the Artistic Director's permission. **Hair** must be securely fastened off the face and neck. **Bulky jewelry of any kind, smart watches** and other electronic devices are not allowed. **Ribbons and ties** on shoes are to be tucked securely out of sight.

## **FUNDRAISING**

Members are expected to assist in promotion of the company and its activities/ programs by participating actively in all fundraising events. A member may choose to pay a stipulated fee *in lieu* of participation if given that option.

## **COSTUMES**

Costumes are the property of Ballet Arts Ensemble. Members must be in compliance with procedures established by the Artistic Director or costume mistress.

## **FEES**

Fees shall be determined by the Board of Directors and communicated to dancers and parents when contracts are issued. Payment to the Treasurer is expected within the time period specified. **SOME** or **ALL** of the fees may be nonrefundable if a student



# Rules and Responsibilities of Company Members

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withdraws from the Ensemble prior to the start of or during the season.

## **COMPLIANCE WITH CLASSROOM ETIQUETTE AND RULES OF CONDUCT**

Members shall comply with guidelines established by the Artistic Director and the Board as communicated both verbally and in written form.

## **NONCOMPLIANCE WITH ESTABLISHED RULES**

Noncompliance with any established rule terminates membership in the Ensemble. A member may be re-

instated by action of the Artistic Director and/or Board of Directors. If a member is dismissed for any reason from Ballet Arts School of Dance, membership from Ballet Arts Ensemble may be discontinued.

## **GRIEVANCE ACTION**

Any grievance action must be directed to the Artistic Director who may refer it to the Board of Directors for action.

Dancer's Name: \_\_\_\_\_

\_\_\_\_\_ Marking this box affirms that we have read and understand the *Rules and Responsibilities of Company Members*. Signatures are on the "Signature Sheet" attached to this document.



# Classroom Etiquette And Rules of Conduct

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Contract Date \_\_\_\_\_

**The following represent a body of expectations regarding studio behaviors.**

**Dancers should:**

- Wear street clothing over dancewear when outside the studio.
- Turn off cell phones before entering the studio.
- Come as early as schedules permit to warm up before class.
- Rise and be standing quietly in place at the barre when the instructor enters the room.
- Adhere to existing dress codes.
- Always turn toward the barre when exchanging sides during exercises at the barre.
- Be attentive to instructor's remarks and alert to all corrections given—both to themselves and to others.
- Address any questions to the instructor—not to fellow dancers.
- Maintain a chessboard formation in the center exercises.
- Change groups quickly and energetically and maintain straight lines throughout the studio.
- Remain on the floor following the lesson at which time it is customary to acknowledge the accompanist and the instructor with applause.
- Give a sincere verbal "THANK YOU" to the instructor (particularly guest master teachers) following a lesson.

**Dancers should not:**

- Bring cell phones to class unless they are turned off and left in dance bags.
- Use cell phones/smart watches/other electronic devices during class time or check cell phones during rehearsal time, unless otherwise permitted by the Artistic Director.
- Enter a class (or rehearsal) in session without first getting the permission of the instructor.
- Wear street shoes in the studio.
- Chew gum, eat, or drink in the studio unless given permission by the instructor.
- Use studio pianos without permission.
- Sit down or leave class without permission except in an emergency.
- Lean on the barres.
- Talk while the class is in session. Questions regarding class material should be directed to the instructor.
- Practice movements other than the one being conducted. No movements of any kind should be practiced while the instructor is addressing the entire class.
- "Turn off" his/her attention when an exercise as been completed, but should listen for the instructor's command to rest.
- Block the accompanist's view of the activity during center work and/or the diagonal combinations.

**Dancer's Name:** \_\_\_\_\_

\_\_\_\_\_ **Marking this box affirms that we have read and understand the *Classroom Etiquette and Rules of Conduct*. Signatures are on the "Signature Sheet" attached to this document.**



# Waiver and Release Form

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

Dancer's Name \_\_\_\_\_ Dancer's Cell \_\_\_\_\_

Parent's Names \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_ Parent's Home Phone \_\_\_\_\_

Business Phone \_\_\_\_\_ Parent's Cell \_\_\_\_\_

Parent's Email \_\_\_\_\_

**EMERGENCY CONTACT** (If parent cannot be reached in an emergency)

Name \_\_\_\_\_

Phone/Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_

Family Doctor \_\_\_\_\_ Phone \_\_\_\_\_

**Medical Insurance Company** \_\_\_\_\_

Policy Number \_\_\_\_\_

List any **health problems** we should be aware of.

List any **allergies** we should be aware of (include medications).

Ballet Arts Ensemble (BAE) strongly encourages you to have a medical doctor give your child a complete physical examination prior to beginning any dance activities and periodically during the time that he/she is a member of BAE. Speak regularly with your child about his/her physical condition and make sure that he/she eats a healthy

diet. If he/she is experiencing any unusual symptoms, you agree that your child will immediately cease participating in BAE's program until BAE receives written permission from a physician permitting him/her to recommence activities as well as any limitations recommended.

**Go to NEXT page to continue with this Waiver and Release Form**





# Waiver and Release Form

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**Please read the following waiver carefully before signing and returning it to BAE.**

I (we) understand that I am enrolling my child in a program of physical activity and agree that my child is in good physical condition and does not suffer from any disability, impairment, or ailment that would prevent or limit his/her participation in BAE's program. I realize that my child's participation with BAE can subject him/her to certain health risks including muscle spasms, sprains, fractured or broken ankle and/or foot bones, torn muscles, abrasions, back injury, and heart palpitations.

If BAE believes that a medical emergency exists, and I and the other Emergency Contact listed above cannot be reached by BAE, I hereby grant permission for BAE to order emergency medical care and/or treatment for my child by licensed medical personnel, including taking my child to a hospital. All expenses that are a result of such treatment will be the responsibility of me or my insurance carrier listed above, and I release BAE from any liability or cost arising from its decision to seek emergency treatment. This release is effective for the period of one year from the date given below.

I (we) am voluntarily enrolling my child in BAE with knowledge of the risks involved in dancing and dance training. I assume all risk of injury to my child while participating in BAE's classes, training, programs, and/or performances.

I (we) assume full responsibility for any illnesses, injuries, damages, and losses which may occur to my child in or about BAE's facility or which arise

out of or are a result of his/her participation in BAE and any of its classes, training, programs, and/or performances. For myself and my child, I forever waive, release, and discharge any and all claims, demands, damages, rights of action, causes of action, costs, liabilities, losses, expenses or judgments, including attorney fees and court costs, present or future, known or unknown against BAE, its directors, officers, advisors, employees, agents, and representatives which are due to the corona virus pandemic or are a result of my child's participation in BAE and any of its classes, training, programs, and/or performances.

I (we) agree to protect, defend, indemnify, and hold harmless BAE, including its directors, officers, advisors, employees, agents, and representatives from and against any and all claims, demands, losses, suits, liabilities, costs, or other damages including court costs and attorney fees, arising from the corona virus pandemic or any injury to my child, the undersigned, or any other persons or damage to or destruction of property arising out of and/or in connection with my child's participation.

I (we) agree that BAE is not responsible or liable to me or my child for any articles that are lost or stolen at BAE's facility or performance venue or for any damage to my automobile or its contents while parked at the site of any class, program, or performance venue.

\* \* \* \* \*

Please check **one** of the boxes below:

\_\_\_\_\_ I (we) have included a doctor's physical as approval for my child to participate in BAE.

\_\_\_\_\_ Marking this box is my (our) **waiver** in place of a physical and indicates that I accept full responsibility as stated above for any illnesses, injuries, medical problems, costs, and expenses arising from my child's participation in BAE.

\_\_\_\_\_ **Marking this box affirms that we have read and understand the *Waiver and Release Form*. Signatures are on the "Signature Sheet" attached to this document.**





# Photo Imaging Consent

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

Dancer's Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

We hereby give permission for Ballet Arts Ensemble (BAE) to use photo images, such as photographs, electronic recordings, or video footage of the undersigned youth, taken by any photographer or video recorder BAE chooses, including those provided by *The Kalamazoo Gazette*, for the purpose of publicity, performances and performance DVDs and electronic recordings, promoting company activities, or raising funds for the Ensemble. This permission is understood to remain in effect until revoked by us in writing.

\_\_\_\_\_ Marking this box affirms that we have read and understand the *Photo Imaging Consent Form* and agree to be bound by its terms. Signatures are on the "Signature Sheet" attached to this document.



# Permission Form

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

Dancer's Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Dancer's Home Phone \_\_\_\_\_

Dancer's Cell \_\_\_\_\_

has my permission to participate in and attend all events organized by  
Ballet Arts Ensemble, both in and out of state.

This permission is valid for the upcoming season.

Parent's Name \_\_\_\_\_

Parent's Home Phone \_\_\_\_\_

Parent's Cell \_\_\_\_\_

\_\_\_\_\_ Marking this box affirms that we have read and understand the *Permission Form* and agree to be bound by its terms.

Signatures are on the "Signature Sheet" attached to this document.



# Parent Volunteer Agreement

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Contract Date \_\_\_\_\_

Ballet Arts Ensemble is a nonprofit organization dedicated to providing educational and performing opportunities for its members while perpetuating the art of dance with an emphasis in ballet. To ensure that this organization fulfills the promises made our members, we require the assistance of parent volunteers who are the backbone of a great organization.

Listed below are the *minimum\** volunteer categories of our organization. *As a parent of a current BAE member, you must select at least one section to assist with this coming 2024-25 season.*

- \_\_\_\_\_ Costuming Assistance
- \_\_\_\_\_ Props Maintenance
- \_\_\_\_\_ Theater Load In and Load Out
- \_\_\_\_\_ Fundraising and Community Events
- \_\_\_\_\_ Flower Sales and Botique Sales
- \_\_\_\_\_ Backstage Theater Assistance

Other parent volunteer needs may come up throughout the season. They will be communicated by either the Artistic Assistant or Administrative Assistant of Ballet Arts Ensemble.

Please note that these volunteer opportunities are created to spread the parent volunteers throughout the organization. Ballet Arts Ensemble reserves the right to shift parent volunteers where needed, and will communicate with those parents if such a case arises.

\_\_\_\_\_  
I, \_\_\_\_\_, hereby understand the Parent Volunteer Agreement and will assist Ballet Arts

Ensemble in the selection I have made above. I also agree to help with other parent volunteer opportunities that may arise throughout the 2024-25 season to the best of my abilities.

**Dancer's Name:** \_\_\_\_\_

\_\_\_\_\_ **Marking this box affirms that we have read and understand the *Parent Volunteer Agreement*. Signatures are on the "Signature Sheet" attached to this document.**



# Dancer Information Form

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

The information on this form will be used for Ensemble mailings, news releases, publicity, and other types of informational material. Unless otherwise indicated, please base your answers on the grade you will be in and the activities you plan to pursue during the 2024-25 school year.

## DANCER'S INFORMATION

Dancer's Name \_\_\_\_\_

Dancer's Address \_\_\_\_\_

Dancer's City / State / Zip \_\_\_\_\_

Dancer's Cell \_\_\_\_\_ Dancer's Home Phone \_\_\_\_\_

Dancer's Email \_\_\_\_\_ Dancer's Birthday \_\_\_\_\_

Number of years in Ballet Arts Ensemble (including this 2024-25 season) \_\_\_\_\_

Parents/Guardians Name With Whom You Live \_\_\_\_\_

Parents/Guardians E-Mail \_\_\_\_\_

Occupation of Parent/Guardian #1 \_\_\_\_\_

Place of Employment \_\_\_\_\_

Occupation of Parent/Guardian #2 \_\_\_\_\_

Place of Employment \_\_\_\_\_

Name(s) of The Local Newspaper/S You and Your Family Read \_\_\_\_\_

School You Attend \_\_\_\_\_ Grade \_\_\_\_\_

Go to **NEXT** page to continue with this **Dancer Information Form**



# Dancer Information Form

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Dancer's Name \_\_\_\_\_

Studio(s) Where You Studied

Number of Years You Studied Dance

_____	_____
_____	_____
_____	_____

Summer Dance Programs You Have Attended Since You Joined The Ensemble and The Year You Attended Them. Also, Include Your Plans For This Summer.

Scholarships Or Grants You Received For Dance Studies and The Year You Received Them. Also Include This Summer

School activities in which you participate. Include all types of activities—academic, athletic, artistic, etc.

School awards you have received and the year you received them.

**Go to NEXT page to continue with this [Dancer Information Form](#)**



# Dancer Information Form

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Dancer's Name \_\_\_\_\_

Scholarships/grants you received for academic studies and the year you received them.

Your career choice and post-high school plans for continuing your education, if known.

Anything else that you would like us to know about you.

\_\_\_\_\_ Marking this box affirms that Ballet Arts Ensemble has permission to use any of this **Dancer Information** for publicity and other informational purposes.  
Signatures are on the "Signature Sheet" attached to this document.



# Signature Sheet

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Contract Date \_\_\_\_\_

Dancer's Name \_\_\_\_\_

Parent's Names \_\_\_\_\_

**Signing this page affirms that I/we have read and understand the following attached forms:**

- \_\_\_\_\_ 1. Dancer Contract (2 pages)
- \_\_\_\_\_ 2. Rules and Responsibilities of Company Members (2 pages)
- \_\_\_\_\_ 3. Classroom Etiquette and Rules of Conduct (1 page)
- \_\_\_\_\_ 4. Medical Waiver and Release Form (2 pages)
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- \_\_\_\_\_ 7. Parent Volunteer Agreement (1 page)
- \_\_\_\_\_ 8. Dancer Information Form (3 pages)
- \_\_\_\_\_ 9. Signature Sheet (1 page)

*Note: If you marked the Box on the last page of **each** form, it will appear above.*

\_\_\_\_\_ **We agree to be bound by the above terms and **accept membership** in Ballet Arts Ensemble.**

\_\_\_\_\_ **We **do not accept membership** in Ballet Arts Ensemble.**

**PLEASE SIGN BELOW** (1) **enter** your full name in the text box next to your relationship to this dancer; (2) enter the date you are "signing" this contract package, and (3) check the box under your name.

**Dancer** \_\_\_\_\_ Date Signed \_\_\_\_\_

\_\_\_\_\_ I understand that by typing my name, I am electronically signing this document.

**Parent** \_\_\_\_\_ Date Signed \_\_\_\_\_

\_\_\_\_\_ I understand that by typing my name, I am electronically signing this document.

President of BAE Board ***Kelly Ballema***

Date Signed **June 1, 2024**

**SAVE THIS DOCUMENT AFTER COMPLETING ALL REQUIRED FIELDS!**

Then attach this pdf document to an email and send it to Lauren Wertz,

BAE Artistic Assistant at **lauren.a.wertz@gmail.com**