

AUDITION FORM

Please download and fill out this form (both pages). Check your audition packet for instructions on where and how to return it, otherwise, bring this with you to auditions.

PERSONAL INFORMATION

Name: _____

Pronouns (she/her, he/him, they/them, other): _____

Age: _____ Height: _____

MUSICALS ONLY

Vocal Range (soprano, tenor, etc. or note range): _____

Can you read sheet music: _____

Email (please print): _____ Phone: _____

Can you receive texts at this number? Yes No

If No, do you have a phone number that can receive text messages? _____

We do some group communication through Facebook groups. If you're a Facebook user, let us know what name to find you under: _____

AUDITION INFORMATION

Auditioning for the role(s) of: _____

Will you accept another role if offered? Yes No Maybe

Would you accept an understudy role or double-cast role if offered? Yes No Maybe

If you are not cast, would you be interested in working backstage crew? Yes No Maybe

Would you be willing to change your hair/facial hair for the role: _____

How did you hear about these auditions? _____

CONTINUED ON NEXT PAGE

Previous Acting Experience (you may include a resume instead):

Schedule Conflicts (please list general work hours/school hours, planned vacations, etc. This will help determine rehearsal schedules. Please be honest about your conflicts.):

Special Skills & Training (accents, stage combat training, dance training, acrobatics, juggling, etc.):

Are you comfortable with performing scenes requiring physical intimacy (stage kissing, touching, etc.) with either same or opposite/other gender scene partners? If you have specific boundaries, please let us know.

Health Disclaimer

Due to the nature of acting and the close nature of theatrical spaces, you understand that we take the health and safety of our volunteers very seriously. Any contagious virus or infection could potentially impact you as well as the rest of the cast and crew and could also impact our ability to mount the production. With that in mind, please initial to indicate you have read and understand the following:

_____ If I am ill (even if it seems minor), I will contact my stage manager immediately.

_____ I am willing to wear a mask during rehearsal if asked for the safety of myself as well as the rest of the cast and crew.

_____ I am willing to take Covid/Flu tests if asked, for the safety of myself as well as the rest of the cast and crew.

_____ I understand that the theatre cannot completely protect me from getting ill during auditions, rehearsals, and performances, and I will not hold the theatre liable for other people's failure to take health precautions.