



AUDITION FORM



NAME _____

AGE _____ HEIGHT _____ WEIGHT _____

HAIR COLOR _____ GENDER IDENTITY _____

ADDRESS _____

CITY _____ ZIP _____

PARENT NAMES _____

PARENT PHONES _____

PARENT EMAILS _____

PARENT EMAILS _____

STUDENT EMAIL* _____

*OPTIONAL IF YOU WOULD LIKE YOUR STUDENT INCLUDED ON THE PRODUCTION COMMUNICATIONS EMAIL LIST

ROLE(S) DESIRED STINKY CHEESE MAN:

ROLE(S) DESIRED HEAD OVER HEELS:

WILL YOU ACCEPT ANY ROLE, INCLUDING CHORUS?

YES NO

WILL YOU ACCEPT ANY ROLE, INCLUDING CHORUS?

YES NO

LIST ANY VOCAL/DANCE TRAINING

LIST ANY MUSICAL INSTRUMENTS PLAYED

SPECIAL SKILLS

LIST CLASS OR CAMP ENROLLED IN TO MEET AUDITION ELIGIBILITY

LIST LAST TWO JT PRODUCTIONS AS A CAST MEMBER

LIST LAST JT PRODUCTION AS A CREW MEMBER

LIST MOST RECENT JT CLASS/CAMP INSTRUCTOR(S)

LIST RECENT PERFORMANCE EXPERIENCE

SHOW

ROLE

COMPANY

YEAR

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

LIST AND EXPLAIN ALL POTENTIAL CONFLICTS

INCLUDE SUMMER SESSION JT CLASSES OR CAMPS, AS WELL AS SCHOOL EVENTS, LESSONS, VACATIONS, AND ANY OTHER OUTSIDE ACTIVITIES. STUDENTS MAY NOT MISS ANY PERFORMANCES OR THE LAST TWO WEEKS OF REHEARSALS. ANY CONFLICTS IN THOSE WEEKS WILL LIKELY DISQUALIFY STUDENT FROM CASTING ELIGIBILITY.

MANDATORY REHEARSALS
STINKY CHEESE MAN:
 JUNE 20-30
PERFORMANCES:
JULY 1, 2, 3, 8, 9, 10, 15, 16, 17
STUDENT MATINEES:
JULY 6 & 12 @ 9:30A & 11:30A

MANDATORY REHEARSALS
HEAD OVER HEELS
 JULY 18-28
PERFORMANCES:
JULY 29, 30, 31, AUG, 5, 6, 7, 15, 16, 17

PARENT INFORMATION

READ AND SIGN BELOW

- I UNDERSTAND THAT ONCE MY CHILD HAS AUDITIONED THERE IS NO REFUND OR CREDIT GIVEN ON TUITION.
- I AGREE THAT IF MY CHILD IS CAST THAT I WILL BE RESPONSIBLE FOR MAKING SURE THEY ATTEND EVERY REHEARSAL THEY ARE CALLED FOR, AND UNDERSTAND THAT LAST-MINUTE CONFLICTS AND UNEXCUSED ABSENCES WILL NOT BE TOLERATED. IN THE EVENT A NEW CONFLICT ARISES, OR FOR AN ILLNESS OR EMERGENCY, I WILL CONTACT THE PRODUCTION MANAGER AS SOON AS POSSIBLE TO COMMUNICATE THE SITUATION
- I UNDERSTAND THAT THERE WILL BE STRICT SAFETY PROTOCOLS AND TESTING REQUIREMENTS PUT IN PLACE FOR BOTH STUDENTS AND PARENTS AND AGREE TO ADHERE TO ANY MEASURES IMPLEMENTED BY JUNIOR THEATRE FOR THE DURATION OF THE HEALTH CRISIS.
- I UNDERSTAND THAT PARENT VOLUNTEERS ARE VITAL TO THE OPERATION OF JUNIOR THEATRE'S PRODUCTIONS AND THAT EVERY PARENT WILL BE ASKED TO HELP IN SOME WAY. SELECT THE AREAS YOU WOULD BE INTERESTED IN VOLUNTEERING FOR TO THE RIGHT.

MARK ALL THAT INTEREST YOU

- PRODUCTION CHAIR OR CO-CHAIR
- OPENING NIGHT RECEPTION
- SCHOOL DAY SHOW MEALS
- STRIKE DINNER
- REFRESHMENTS
- LOBBY DECORATION
- MEMORY BOOK
- LOAD IN/ STRIKE
- COSTUMES
- SCENIC/ PROP BUILDING AND PAINT
- PARENT MONITOR/CURBSIDE PICKUP
- HOUSE MANAGER/ WILL CALL

 PRINT NAME

 SIGNATURE

LIST YOUR LOCAL COMMUNITY
 NEWSPAPER OR PUBLICATION

ARE YOU A MEMBER OF THE JUNIOR THEATRE YES NO
 AUXILIARY?
 IF NO, WOULD YOU BE INTERESTED IN JOINING? YES NO