

Into the Woods, Jr Audition Form

CLEARFIELD CITY YOUTH WINTER THEATER

Personal Information

Name		Email Address	
Address		Phone Number	
Height	Age	Hair Color	Eye Color
Birth Date	Vocal Range	Shirt Size	Pant Size

Additional Information

Please list any previous experience you have had in ACTING, SINGING and DANCING: (If you have a resume and headshot please bring)

Rehearsals will be held Tuesdays and Thursdays from 6-8:00 pm. Please see attached rehearsal calendar.

Do you have any conflicts with these times?

If so, what are they? (*Please be as specific as possible*)

Event _____ Date of Event _____

Are you auditioning with a family member? _____ If yes, please list names. _____

Top three characters I would like to play, in order of preference:

- 1.
- 2.
- 3.

Please check one:

_____ These are the only roles that I am interested in.

_____ I will accept any role.

(Please be honest. Checking one of the other will not affect your chances of getting your desired role.)

The one character I really do not want to play

- 1.

POLICIES AND ATTENDANCE AGREEMENT

Parents and Auditionees please read and initial each policy:

_____ I understand that being a cast member of Into the Woods, Jr is a commitment from Jan 3-Mar 4, 2017. Please see the Into the Woods, Jr. Rehearsal and performance calendar for possible conflicts.

_____ I am disclosing the dates of possible conflicts in the space provided.

_____ I understand there is a \$35 participation fee that must be paid to Clearfield City at the time of accepting my role, in order to get script and rehearsal CD.

_____ I understand that in order to move the show forward at the scheduled pace, attendance to rehearsals is required. I also understand that attendance to all performances is required.

_____ I understand that I must have all my lines and music memorized by January 26, 2017. I will be asked to leave the show if I do not meet the deadline.

_____ I understand the following expectations set for my Auditionee as a cast member:

- I will pay attention and follow the requests of the director and stage manager at all times.
- I will show respect by keeping my hands, feet, and objects to myself.
- I will use appropriate language at all times and be mindful of younger cast members.
- I will remain in the Little Theater and ask for permission to leave.
- I will not explore and run around the building.

GENERAL POLICIES

- Notify staff regarding any special circumstances or medical requirements cast member may have.
- Parent/guardian must check for adult supervision before leaving their cast member at rehearsals.
- Parent/guardian must pick-up their participant at the designated time and no later.
- Please wear shoes, such as sneakers, that allow for movement. Flip flops and similar open-toed shoes are not appropriate.

I/We have read and initialed the above information regarding Policies and Attendance and accept responsibility for the possible consequence of exclusion for violating them and agree to follow them without dispute.

Auditionee's Name (Print): _____

Auditionee's Signature: _____ Date: _____

Parent/Guardian's Name (Print): _____

Parent/Guardian Signature: _____ Date: _____