

Beauty and the Beast Audition Form

CLEARFIELD CITY FALL FAMILY THEATER

Personal Information

Name		Email Address	
Address		Phone Number	
Height	Age	Hair Color	Eye Color
Birth Date	Vocal Range	Shirt 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 6:00-8:30 pm. Saturdays 9:00 am-12:00 noon. Tech and dress rehearsals will run later. 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. _____

Will you accept a role if a family member is not cast? _____

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 or the other will not affect your chances of getting your desired role.)

The one character I really do not want to play: _____

POLICIES AND ATTENDANCE AGREEMENT

Parents and Auditionees please read and initial each policy:

_____ I understand that being a cast member of Beauty and the Beast is a commitment from Sept 5-Nov 18, 2017.

Please see the Beauty and the Beast 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 a script and access to rehearsal music.

_____ 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 October 10, 2017. I will be asked to leave the show if I do not meet the deadline.

_____ I understand the following expectations set for each cast member:

- I will pay attention and follow the direction of the director and stage manager at all times.
- I will be kind and respectful to the production team, stage crew, and fellow cast members.
- I will keep 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 designated rehearsal space and not explore or wander around the building.
- I will turn my cell phone off and not use it during rehearsals.

GENERAL POLICIES

- Notify staff regarding any special circumstances or medical requirements a 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, dance shoes, etc. that allow for movement. Please do not dance barefoot unless instructed otherwise.

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: _____