



Actor Number \_\_\_\_\_

# Actor Audition Form

Please write legibly...you know, so we can read it...seriously...

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Age: \_\_\_\_\_ (if 16 or under, see bottom of pg 2)

College/School: \_\_\_\_\_ Year/Grade next year: \_\_\_\_\_ Running Start?

Y or N

List **recent theatre productions** or **performance opportunities** you have been a part of:

Title of Show	Theatre Company	Role Played	Year

**Dance Training/Styles/Experiences:** List by style and rate your *skill* from 1-5 (1 = basic lessons, 5 = ready to solo)

Style \_\_\_\_\_ Rating \_\_\_\_\_ Style \_\_\_\_\_ Rating \_\_\_\_\_ Style \_\_\_\_\_ Rating \_\_\_\_\_

Other dance/movement notes: \_\_\_\_\_

**Voice Type** (*alto, tenor, etc.*): \_\_\_\_\_ **Voice Range** (*if known*): \_\_\_\_\_ to \_\_\_\_\_ (note: middle C is 'C4')

**Describe any vocal music training:**

\_\_\_\_\_

**Preferred Role(s):** \_\_\_\_\_

Willing to accept any role?  Yes  No

**Ensemble Roles of Interest:**

\_\_\_\_\_

**Other Talents/Abilities** you would be willing to perform on stage:  Skateboarding  Roller Skating

Juggling  Acrobatics  Instrument(s) - specify \_\_\_\_\_

Accent(s) - specify \_\_\_\_\_  Other: \_\_\_\_\_

**Interested in helping with other parts of the production?** If so, please tell us what interests you!

Lighting  Costumes  Set Construction  Stage Crew  Set Painting  Puppetry  Props

Property Management  Other: \_\_\_\_\_

**Specific Production Experience?**

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Please indicate if you have a **medical condition** that would be affected by the following special effects:

Fog/haze    Strobe Lights    Bubbles    Other - specify \_\_\_\_\_

**Conflicts:** Please mark with an "X" commitments that would create conflicts with rehearsals from May 25-July 19

*Note: We will not rehearse during the weekday, no information is needed for the grey sections.*

	MON	TUES	WED	THURS	FRI	SAT	SUN
8:00-10:00 AM							
10:00-12:00 PM							
12:00-2:00 PM							
2:00-4:00 PM							
4:00-5:00 PM							
5:00-6:00 PM							
6:00-7:00 PM							
7:00-8:00 PM							
8:00-9:00 PM							

**PLEASE FILL THIS OUT COMPLETELY**

List any **specific** absences you have between May 25 and July 19 (ex: summer camp, vacation/trip, etc).

\_\_\_\_\_

\_\_\_\_\_

*I attest the above conflicts are complete and accurate, and I have no other schedule conflicts May 25-July 19.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*I give permission for Grays Harbor College and the Bishop Center to use my image in promotional materials.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Actors 16 Years & Under** parent or guardian signature is required:

I give my child \_\_\_\_\_ (fill in actor's name) permission to participate in the Grays Harbor College production of The Spongebob Musical.

**Parent/Guardian Name:** \_\_\_\_\_ **Actor's Age:** \_\_\_\_\_

**Parent/Guardian Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*I give permission for Grays Harbor College and the Bishop Center to use my child's image in promotional materials.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_