



Audition Number: \_\_\_\_\_

Date: \_\_\_\_\_

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

Best phone number(s): \_\_\_\_\_

Email: (PLEASE PRINT CLEARLY) \_\_\_\_\_

Age: \_\_\_\_\_ Height: \_\_\_\_\_

Role(s) you are interested in: \_\_\_\_\_

Would you accept another role if cast differently? YES or NO

Comments: \_\_\_\_\_

**RECENT** roles or theatrical experience (Acting, Singing, Dancing, any other "Special" talents):

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### Rehearsals

Rehearsals are scheduled to start Monday, January 21 and Wednesday, January 23 (ALL CAST). Rehearsals will be scheduled for Sundays (2 -6 PM), Mondays, and Wednesdays (6- 9PM) through mid-March, but will increase as time goes on.

We will do our best to only schedule you during times that you are needed but will require availability during those days/times, with as few exceptions as possible.

Please fill out the other side as well.

## Conflicts

Please list days and times of your regular activities that you participate in including weekends and evenings. Regular business and school hours are NOT necessary to list.

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What is the earliest hour of the day that you could arrive at rehearsal (weekdays and Sundays)? \_\_\_\_\_

Dates of any conflicts for future rehearsals (ie: travel plans, medical appts, other) between now and May 19, 2019 \_\_\_\_\_

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**TECH WEEK WILL BE SUNDAY, APRIL 28 thru THURSDAY, MAY 2<sup>nd</sup>!!**

## Show Dates

**Friday and Saturday Evenings 7:30 PM and Sunday afternoons 2:00PM May 3 thru 19.**

**ATTENDANCE WILL BE NECESSARY!!!**

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**Volunteering:** Show participants and their families are encouraged to get involved at the Falmouth Theatre Guild as we are truly a community organization! There will be MANY opportunities to volunteer in ALL aspects of producing this show. Please consider any or all of the following off-stage opportunities and check off your possible interests.

Box Office/ ushering\_\_\_\_ Light crew\_\_\_\_ Set Construction\_\_\_\_ Concessions\_\_\_\_  
Painting\_\_\_\_ Props assistant\_\_\_\_ Costumes\_\_\_\_ Other\_\_\_\_

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I have read and agree with the Falmouth Theatre Guild policies.

Please print Name and sign: \_\_\_\_\_

If you are under 18 years of age please have a parent or guardian fill out and sign the separate parental permission form.

## **FTG Parent Permission and contact information**

Name of person auditioning: \_\_\_\_\_

I support my child's participation in this Falmouth Theatre Guild production.

I have read and agree with the FTG production and policies letter.

I understand that failure to comply with the policies may result in my child's dismissal from the production.

I further understand that my child's name, photo, and or video images may be included in publicity or promotional materials.

Parent's name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email (please print CLEARLY): \_\_\_\_\_