

Audition Card for "OZ!" # _____

Circle One: Male or Female Age _____ Date of Birth _____

Name _____ Phone Number _____

Parent's Name _____

Address _____ E Mail Address _____

City _____ State _____ Zip _____

School Attending: _____ Grade _____

What part if any are you interested in? _____ Would you be willing to take any part given to you _____?

Are you interested in being a part of the tech crew if not chosen for a role? _____

Previous Theatre Experience or Classes Taken: (List below or attach resume)

1. _____
2. _____
3. _____
4. _____

Do you have any dance experience? _____ If Yes, What kind and how many years?

Do you have any singing experience? _____ If yes, what? _____

Do you have any special or interesting skills? (eg. Juggle, talk like Donald Duck) _____

References: (please list below at least two adults you know who we can call if we need to)

Name _____ Occupation _____

Phone Number _____

Name _____ Occupation _____

Phone Number _____

Please list any possible conflicts you might have, eg. classes, lessons that occur on a regular basis, including the days of the week and the times.

Time Monday Tuesday Wednesday Thursday Friday

List any specific dates and events that would make you unavailable during the rehearsal and performance process:

I am aware that being involved in a production at EVCT is a big responsibility and will require a lot of dedication on my part. If chosen to be a member of this production at East Valley Children's Theatre, unless an absence or tardiness has been pre-approved, **I will attend all rehearsals and performances** required of me and follow the directions of those individuals in charge. **I WILL BE ON TIME!** If for any reason I cannot attend a rehearsal, I will notify the stage manager prior to the rehearsal. I know that if I do not follow these guidelines, I run the risk of being dropped from the show.

Date _____ Signature of Youth auditioning _____

Date _____ Signature Parent/Guardian _____