**TEENS ON STAGE AUDITION FORM SUMMER 2019**

Name (First, Last):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Role Preference(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you accept any other role? \_\_\_\_\_\_ Did you complete Conflict Sheet? \_\_\_\_\_\_

What do you hope to get out of this program?

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Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_ Preferred gender pronouns: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(street) (city/state/zip)

**YOUR CONTACT INFORMATION:**

Phone number(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address(es): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENT/GUARDIAN CONTACT INFORMATION (For applicants under 18)**

Parent/Guardian Name: Preferred phone number:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address(es): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**QUESTIONS FOR ALL APPLICANTS:**

Are you or your parent/guardian able to insure reliable transportation to and from all rehearsals and performances? \_\_\_\_\_\_

Parent Signature (for applicants under 18) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Would you like to be added to the e-mail list for audition notices? YES NO ALREADY ON IT!

Some roles may dictate that an actor change his/her appearance. If the role requires would you:

Cut/grow hair?: \_\_\_\_\_\_ Dye hair?: \_\_\_\_\_\_ Cut/grow beard/moustache?: \_\_\_\_\_\_

**Please DO NOT change your appearance if you are cast without the consent of the Director and Costume Designer!**

**Please list any classes you have taken at Raleigh Little Theatre:**

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**Please list any training in the performing arts you received elsewhere:**

**(or attach resume)**

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**Do you have previous performance experience? If yes, please list or attach resume.**

**ROLE: PLAY ORGANIZATION YEAR**

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**If you have any special talents (musical instruments, stage combat, languages, dialects, circus tricks, etc.) you would like us to know about, please describe below:**

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