

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

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

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

What do you hope to get out of this program?

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

Birthdate: \_\_\_\_\_ Grade (in Fall 2020): \_\_\_\_\_ School: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ *(Note: this question is optional to fill out and information is gathered only for grant reporting purposes.)*

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.**

<b>ROLE:</b>	<b>PLAY</b>	<b>ORGANIZATION</b>	<b>YEAR</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**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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