

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 2022): _____ School: _____

Race and 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? Do you need assistance with finding transportation? If so, please explain how RLT may be able to assist you:

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!

How did you hear about the Teens on Stage / Teens Backstage program? _____

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:
