

PLEASE PRINT CLEARLY

MUST ATTACH GRADES AND HEADSHOT

GRADES CAN BE OBTAINED ONLINE OR FROM YOUR SLC - HEADSHOT DOES NOT NEED TO BE IN COLOR OR PROFESSIONAL

Name :

Male / Female

Current Grade Level:

8 AMS BMS 9 10 11 12

Cell #:

Home#:

E-mail:

Parents name:

Parents Email:

ROLES:

When you audition, you are agreeing that you are willing to play any role in the script. However, feel free to list the roles that are most appealing to you

STUDENT/ PARENT CONTRACT/AGREEMENT

1. I have completed the audition application according to the checklist below
2. **We have listed all of the student's time commitments and obligations on the calendar provided.** We have included any work, athletics, doctor's appointments, tutoring, music lessons, church/community/club obligations, vacation plans, family events, etc
3. We understand that all rehearsals involving a student's role (no matter how small) are mandatory and unless we have indicated on the calendar that the student has a previous commitment, he/she MUST attend those rehearsals
4. **We understand that the student cannot miss ANY rehearsal, performance or workday for ANY reason from the time indicated on the calendar**
5. We have paid particular attention to the rehearsal schedule times during tech week
6. We will not schedule additional events that conflict with the rehearsal calendar.
7. We understand that by auditioning the student agrees to accept whatever role he or she is given.
8. I agree to work cooperatively with everyone who is connected with this production.
 - CHECKLIST.
 - Audition Application Form – completed at home Actor's Contract with Parent's signature
 - Copy of Grades
 - Résumé of Acting Experience- Use your own form or the form provided on our website
 - Calendar with ALL of your personal conflicts
 - On the back please feel free to add COMMENTS to let the casting directors know anything that you think is significant but is not covered on any other part of this application.

SIGNATURES

Student

Parent