

SOUND OF MUSIC AUDITION FORM

Actor Name		Age	Height	Hair Color
·				
Vocal range	Can you read music?	Role(s) Desired: _		Would you accept any role Y N
(*If under 18) Parent	/Guardian	Parent/Guard	dian Email _	
Please write leg	gibly, as we will be using this i	nformation to contact you	u regarding c	asting for the show!
PREVIOUS EXPER	RIENCE (or attach resume) –	List most recent first:		
Show		Role	Place	Year
Show		Role	Place	Year
Show		Role	Place	Year
Show		Role	Place	Year
SPECIAL TALENTS	S (or attach resume): Juggling,	gymnastics, dialects, playi	ng a musical in	strument, etc.
HOW DID YOU HE	AR OF THIS AUDITION?: Frie	end, Newspaper, Teache	er, etc.	

GENERAL INFORMATION

AUDITIONS: Arrive at least 15 minutes ahead of your audition to complete your Audition Form (if you haven't filled it out already).

CALLBACKS: Callbacks will be held on <u>Sunday January 16th 1-5pm</u>. Callbacks will be posted on our website and emailed out.

REHEARSAL: March 14-May 12; Mondays and Wednesdays 6-9pm, Saturdays 11-3pm plus additional rehearsals TBA.

TECH WEEKEND/WEEK: May 7 & 8: 10am-6pm; May 9,11, 12: 5-10pm

Parent Signature:

PRODUCTION FEE: \$675 (17 and under)

*FINANCIAL AID FACTS: Throckmorton Theatre makes every effort to award financial aid to program participants who demonstrate a strong financial need. Financial aid is disbursed on a sliding scale.

PERFORMANCE DATES: May 13-29th, 2022

attending callbacks, rehearsals or performance	conflicts. List all conflicts that would keep you from es. Please also include conflicts that would necessitate you with actor availability in mind. New conflicts complicate the ICTS ARE NOT ACCEPTED
from and against any and all liabilities for any way connected with participation in programs	s the Throckmorton Theatre and its officers and employees injury which may be suffered by me arising out of or in any at the Throckmorton Theatre. In case of an emergency, le the Throckmorton Theatre permission to use photographs
Signature:	Date:
Throckmorton Theatre and its officers and emp which may be suffered by me or my child ar programs at the Throckmorton Theatre. In ca	named, hereby agree to indemnify and hold harmless the ployees from and against any and all liabilities for any injury rising out of or in any way connected with participation in ase of an emergency, my child may be treated by a qualified permission to use photographs and video of my child in all

Date: