

ENCORE/CHILDREN'S THEATRE – AUDITION FORM

Please fill out completely, return to the desk and receive a number. **Please print clearly.**

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Child's e-mail address: _____

Age: _____ Birth Date: _____ Grade: _____ Hair Color: _____ Eye Color: _____ Ht: _____ Wt: _____

Mother's Name: _____ Cell Phone: _____ Email: _____

Father's Name: _____ Cell Phone: _____ Email: _____

Which parent will be the key point for contact information and updates? (circle) Mother Father

Key Parent Contact's Address (if different from above)

School (Name, City and County):

How did you find out about this audition? _____

Have you auditioned for Encore/TCT before? (circle one) YES NO

Please list your stage experience, including the names of the plays, the roles you played and where they were produced (*e.g.*, The Children's Theatre, church, school, *etc.*). Also include any theatre, voice, or dance classes you have taken. Attach an additional sheet, if necessary.

SHOW

ROLE

WHERE

Do you play a musical instrument? Yes ___ No ___ Which one(s)? _____ How long? _____

List any other special skills (juggling, gymnastics, rollerblading, roller skating, etc.) _____

Why do you want to be in this play? _____

Will you accept any role offered? (Circle one) YES NO

PLEASE BE SURE TO FILL OUT THE CONFLICTS PORTION OF THIS FORM AND THE SURVEYS, ON THE REVERSE SIDE AND ON THE SECOND PAGE!!

THANKS FOR COMING AND BREAK A LEG!

SCHEDULE CONFLICTS

Please review the rehearsal calendar carefully and list **ALL** conflicts below. Minor conflicts will not affect casting. However, if you are cast and other conflicts come up, which are not reflected on this form, this TCT show **must** be your first priority. **The director will replace cast members who are not responsible about clearing conflicts and honoring their commitment to this show.**

When reviewing whether you have any conflicts for the dates listed on the rehearsal schedule, please consider **all** potential conflicts. Ask yourself whether you have any sports, dance, theatre, music or any other after-school activity that has a practice, game or performance that will conflict with any rehearsal or performance dates. In addition, please list any personal or family obligations that will conflict with any rehearsal or performance dates.

PLEASE NOTE ALL CONFLICTS BELOW (attach an additional sheet, if necessary). WE ABSOLUTELY MUST KNOW ABOUT ANY CONFLICTS WITH TECH WEEK, BRUSH-UP REHEARSAL OR PERFORMANCES:

AUDITION APPLICANT SURVEY

This section is to be completed by the child who is auditioning.

1. Have you ever seen an Encore Stage & Studio production? Yes No
2. If you have seen more than one Encore show, which one was your favorite? _____
3. Do you like to read? Yes No
4. If you had a choice of books, would you prefer to read historical fiction (like "Pocahontas"), classic books (like "Winnie the Pooh") or fairytales (like "Cinderella")? _____
5. Do you have a suggestion for the 2011-2012 season? _____

PARENT SURVEY

This section is to be completed by the parent of the child who is auditioning.

1. What is your zip code? _____
 2. Do you incorporate, or have you incorporated, reading with your children? Yes No
 3. Has your family read any of the books from which we derive our season selections? Yes No
 4. Have you ever seen an Encore Stage & Studio production? Yes No
 5. Do you have a favorite Encore show? If so, which one? _____
 6. Do you plan to attend the ACT III Young Adult and Community production of *The Pirates of Penzance* that Encore will produce next summer (July-August 2012)? Yes No
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