SRJC THEATRE ARTS DEPARTMENT $\underline{\text{CHILD}}$ AUDITION INFORMATION FORM (Revised 6/19/19)

SHOW: THE SOUND OF MUSIC Audition Piece:	
Auditioning for a specific role/roles? If so, which one(s)?	
Are you willing to accept any role (including chorus or non-speaking)? Yes No (If "No", explain in space below)	
Callback Availability: Callbacks are held this Sunday, 1:00-9:00 PM; actors may be called back for all or part of that If you are called back, can you attend for the entire callback period on Sunday? Yes No (If "No", explain below)	— time
Callback Notification: The callback list will be on the virtual callboard, on the rehearsal hotline, and posted at one phy location (TBA) on Saturday by 6:00PM. Actors with special situations can request to be notified by phone, email or textual callboard.	
Do you need a special callback notification? Yes No Method/Time:	
Please print all information CLEARLY. Complete both sides of this form. If applicable, attach acting resume.	
CHILD'S NAME	
PARENT/GUARDIAN NAME:	
Home Phone Address	
Work Phone Zip	
Cell Phone Email	
Child's Physical Information: Age Grade Level: School attending:	
Height Weight Hair Color Eye Color	
Are you willing to cut, color, or grow your hair, if necessary?	
YOUR PERFORMANCE SKILLS, EXPERIENCE & TRAINING:	
Singing: Vocal Range (circle): Sop. Alto Tenor Baritone Bass	
Choral singing experience? Yes No Do you read music?	
Dance: List styles (ballet, tap, ballroom, etc.) & skill level:	
Musical Instruments: (instruments & skill level)	<u> </u>
Other Performance Skills: (dialects, combat, etc.)	
Experience and Training : Please list your <u>recent</u> shows and performance classes/workshops below (include role, year, and theatre for shows; for classes, include title, school, and instructor) OR attach your ACTING RESUME.	d

EXPERIENCE AND TRAINING (continued):			
however, weekend afternoons are	sometimes use	vary from show to show, but are <i>usually</i> held 5 days a week in the evenings; ed. Please note your regular weekly conflicts below, including times and erformance. (See posted information about specific production schedule.)	
Mondays after 6:00 PM (rare):	(circ Available	cle) Conflict	
Tuesdays after 6:00 PM:	Available	Conflict	
Wednesdays after 6:00 PM:	Available	Conflict	
Thursdays after 6:00 PM:	Available	Conflict	
Fridays after 5:00 PM:	Available	Conflict	
Saturdays after Noon (rare):	Available	Conflict	
Sundays after Noon:	Available	Conflict	
Note: Information concerning disab	ilities, allergie	CIPATION CONSENT (To Be Completed By Parent/Guardian) s and phobias is strictly voluntary (animals, fabrics, scents, etc)? Phobias (heights, tight spaces, falls, etc.)?	
doing so, this may or may not affect	our ability to	r special circumstances such as those below. Should you be uncomfortable cast you. If you are uncomfortable with or unwilling for your child to be in the <i>ICERNS</i> (if needed, the director will discuss your concerns privately).	
Concerns Using profanity of Using the word "Concerns"	nce of actors we rebeing in the p God" onstage of or of a different	resence of others doing so on stage or off stage r being in the presence of other doing so on stage or off stage. gender, cultural background than your own.	
I take full responsibility for his/her a My child will take care of himself/h Theatre Arts Department permission posted criteria regarding the respon	actions while d erself and othen to announce and aribilities of are	hoice for my child to participate in the SRJC Theatre Arts audition process and oing so. I understand that auditions can be physically and vocally demanding; rs, as well as abide by all safety instructions during the audition. I give the and/or post my child's name should he/she be called back. <i>I have also read the a SJRC actor</i> and understand that, should my child be cast, this includes lass (fee approx. \$100-\$200, depending on show responsibilities.)	
Name		Signature	