

Actor's Audition Sheet

Production: The Secret Garden

Name: Preferred Pronouns: he/him she/her they/them none preferred prefer not to disclose other Phone: Home _____ Mobile _____ Email:_____ Age: 🗆 10-15 🔍 15-19 💭 20's 💭 30's 💭 40's 💭 50's 💭 60 + Acting Experience: (It's okay if you don't have any. Continue on separate sheet if necessary.) List most recent and relevant. Singing Experience: (It's okay if you don't have any. Continue on separate sheet if necessary.) List most recent and relevant. Vocal Range (if known): Dance/Movement/Accents/Other Skills: (List any other relevant skills you may have):

Are you willing to play a role of any gender? Y / N

Are you reading for a specific part?

Is there anything you are NOT prepared to do if the part calls for it (e.g. cut, grow or colour hair or beard?)

Days and times you are **<u>NOT</u>** available for rehearsal:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
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Do you have other commitments that could interfere with the rehearsal period, e.g. work or a planned vacation? It is okay if you are unsure at this moment.

Do you understand that a commitment must be made and all rehearsals must be attended as required by the director?

If you are not cast would you be willing to work on the show in another capacity? Do you have a particular area of interest or expertise?

	Are you a current member of	f Shuswap Theatre?	Yes 🗖	No 🗖	Unsure 🗖
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Signed	
Signed	

Date

Signature of Parent or Guardian (if under 19)_____

I give permission for production photos of me to be published for publicity. \Box Yes \Box No

NOTE: Involvement in a Shuswap Theatre production requires you to become a member. Cost is \$10 per year for an adult, \$7 for students and \$25 for a family. If this is a festival show, you will also be required to become a member of Theatre BC.