

PHOTO

WELCOME!

1. ABOUT YOU

| NAME: | |
|---------------|--|
| EMAIL: | |
| CELL PHONE #: | |
| HOME PHONE #: | |
| AGE/AGE | |
| RANGE: | |
| HEIGHT: | |
| HAIR COLOR: | |

| VOCAL | RANGE | | TO | | OR CIRCLE BELOW | | |
|--------------------|-------|-----|----|----|-----------------|----|----|
| S1 | S2 | A1 | A2 | T1 | T2 | B1 | B2 |
| DO YOU READ MUSIC? | | YES | | NO | | | |

| AUDITION SONG INFORMATION | | |
|---------------------------|--|--|
| TITLE | | |
| FROM (SHOW | | |
| NAME) | | |

| ARE YOU AUDITIONING FOR A SPECIFIC ROLE(S)? YES NO | | | |
|--|--|--|-----|
| IF SO, WHAT | | | |
| ROLE(S)? | | | |
| WOULD YOU ACCEPT A SUPPORTING ROLE IF | | | NO |
| OFFERED? | | | INO |

Auditions: You're a Good Man, Charlie Brown

| | AUD# |
|---|-----------------|
| | |
| 0 | Office use only |

2. STAGE EXPERIENCE

Please list the last five shows in which you have been cast and your role (if applicable).

| SHOW | ROLE | THEATRE/SCHOOL |
|------|------|----------------|
| | | |
| | | |
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| | | |
| | | |
| | | |

3. DANCE/MOVEMENT EXPERIENCE

Please list number of years (round to nearest whole number)

| BALLET | BALLROO M | JAZZ | MODERN | TAP | OTHER |
|--------|--------------|------|--------|-----|-------|
| | | | | | |

Do you have any physical limitations that would affect choreography?

4. OTHER SKILLS

Please check all that apply to you and your abilities. **BE SPECIFIC**

| PLAY INSTRUMENTS (WHICH ONES?) |
|--------------------------------|
| IMPROVISATION/IMPERSONATIONS |
| OTHER (PLEASE EXPLAIN BELOW) |
| |

6. ANY CONFLICTS?

Please use the space provided to list any rehearsal conflicts* you may have. If you have a partial day conflict, please specify as well.

Conflicts on performance dates cannot be accommodated.

*Typical Rehearsal Schedule is Mon-Thurs, 7-10:30pm; Sat & Sun 1-5pm

Rehearsals will begin on September 25, 2017. Performances:

Friday, October 27th at 7:30 PM Saturday, October 28th at 2:00 PM and 7:30 PM Sunday, October 29th at 3:00 PM at the Penn State Downtown Theatre Center

7. DRUG & ALCOHOL POLICY

The consumption and/or use of alcohol and illegal drugs is STRICTLY PROHIBITED in the vicinity of all rehearsals and performances. By being cast or participating on the production staff, you agree to adhere to this policy. Any individual found violating the policy will immediately be removed from the production and forfeit any compensation they may have received.

8. PREVIEWS AND MARKETING

In addition to rehearsals, you may be asked to make appearances to promote the show, including (but not limited to) radio and TV interviews, and private or public previews.

By agreeing to being cast, do you also agree to make *all efforts* to make these appearances?

9. READ THIS

If you are cast in this production, any images of you, still or moving, may be used by SCCT for promotional and/or advertising purposes. You will also be required to pay a \$25 deposit for the libretto. You will be refunded this deposit on returning the libretto in the same condition in which you received it, having erased all pencil marks made during rehearsals.

Please note also that current membership is required in order to perform in the show. If you are cast, you will be required to become a member prior to the start of rehearsals. Membership runs January 1 – December 31 each year.

If you are cast in this production, you will be individually contacted (by phone and/or email). Full cast lists will be posted on the SCCT website and Facebook pages as quickly as possible.

10. SIGN HERE

If you are under the age of 18, your parent/guardian must also sign this form. Signatures of child and parent/guardian signify and act as an agreement of good behavior and responsibility at all times.

| SIGNATURE: | DATE: |
|---|-------|
| | |
| | |
| PARENT/GUARDIAN SIGNATURE (IF UNDER 18) | DATE: |

11. ONE MORE THING

We need your mailing address for our records.

| STREET: | | | |
|---------|--------|------|--|
| CITY: | STATE: | ZIP: | |