

'Shrek JR' – Audition Form



PERSONAL DETAILS

Name: _____ Date of Birth: _____

Address: _____ Phone (H): _____

Suburb: _____ Postcode: _____ Phone (W): _____

Email Address: _____ Mobile: _____

Please add me to the Adelaide Youth Theatre Company Mailing List Yes / No

How late in the evening can we call you in regards to your audition? _____

PRODUCTION DETAILS

Preferred Role(s): _____

If you are not selected for your preferred role, are you prepared to play another role? Yes / No

If only prepared to play certain roles please indicate them here: _____

If you are not selected for your preferred role, are you prepared to be in the ensemble? _____ Yes / No

If you are not selected as a member of the cast, are you interested in assisting the company in other areas such as set construction, crew, front of house, publicity, sewing etc?

Please list any dates/times that you are unavailable to attend rehearsal due to prearranged events/holidays.

EXPERIENCE/TRAINING

Vocal Range (please circle one): Soprano Mezzo Alto Tenor Bass Unknown

I can read music (please circle one): Well A Little Not at All

Do you play an instrument? How long?: _____

Vocal Tuition (How Long/Type/Teacher): _____

Dancing Tuition (How Long/Type/Teacher): _____

Acting/Stagecraft Tuition (How Long/Type/Teacher): _____

Other skills we may be interested in (eg acrobatics, magic, juggling): _____

Do you have any injuries that require choreographic consideration? _____

PREVIOUS STAGE EXPERIENCE			
Show	Company	Role	Year

- I understand that if I am cast in the show I am required to become a financial member of Adelaide Youth Theatre Company (AYT) and will be required to pay a show and costume levy, due within the first few DAYS of rehearsals.
- I am aware that if successful in my audition I have committed to ALL rehearsals and production dates required of me (unless previously discussed with the Director) and understand that my absence could necessitate my being withdrawn from the show and being replaced.
- I agree to make myself available for all required publicity and promotional events..
- I give permission for AYT to take photographs during the audition book-in process and that these photos will be used for the purpose of casting, and if successful in gaining a place in the show they will be distributed to relevant Heads of Departments (i.e. wardrobe).
- I understand that auditions will be video recorded for the purpose of casting (video will be destroyed once the show is cast).
- I also give permission to AYT to take photographs and make video or sound recordings of me and use these photographs, videos or sound recordings for future publicity and promotion of AYT and its productions.
- I also give permission for my details to be provided to persons that will require them in the course of the season for medical treatment or contact purposes and the distribution of information.
- I understand a more detailed medical form will be required if myself or my child are cast into the show

Signed: _____ Date: _____