

# \_\_\_\_\_

**Ardmore Little Theatre Children's Audition Form**

*Please Print Legibly*

Office Use Only:
Singing: A B C D E F
Spoken: A B C D E F
Stage Presence: A B C D E F
Dance: A B C D E F
Notes:

**Student Info:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Gender: M F

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**Other Siblings auditioning? Y / N. If yes, names:**

\_\_\_\_\_

**What Role(s) are you auditioning for?** (Rank in order of preference, up to 3 choices): \_\_\_\_\_ Any Role

\_\_\_\_\_ Duchess \_\_\_\_\_ Toulouse \_\_\_\_\_ Berlioz \_\_\_\_\_ Madame \_\_\_\_\_ Marie \_\_\_\_\_ Edgar

\_\_\_\_\_ Roquefort \_\_\_\_\_ Napoleon \_\_\_\_\_ Dogs \_\_\_\_\_ Thomas O'Malley \_\_\_\_\_ Aley Cats

\_\_\_\_\_ Abigail or Amelia Gabble (geese) \_\_\_\_\_ Anything with singing \_\_\_\_\_ Dancer

\_\_\_\_\_ Anything without lines (please don't make me talk☺) \_\_\_\_\_ Other? Please list \_\_\_\_\_

**Are there any Allergies/Medical Conditions/Special Needs that we should be aware of?**

\_\_\_\_\_

**Previous Stage Experience:** (It's perfectly fine if this is your first show)

\_\_\_\_\_

\_\_\_\_\_

**Special Skills:** (Dance, gymnastics, vocal training, etc) \_\_\_\_\_

**Scheduling Conflicts:** Please list below any known conflicts you will have between now and the performance dates. (Continue on separate sheet if necessary).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Parent/Guardian Info:** (PLEASE PRINT) – *If multiple children, you only have to fill this out on one child's form.*

Name(s): \_\_\_\_\_

Phone: (Cell) \_\_\_\_\_ (Other) \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency/Other Contact: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Who will be picking the student up from rehearsals? \_\_\_\_\_

\_\_\_\_\_

How did you hear about auditions? \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Ardmore Little Theatre's Cast Requirements:

As a cast member and parent, I agree to:

- Be on time for all rehearsals.
- Be at all scheduled rehearsals, unless prearranged and approved by the Director.
- Notify the Director in advance of any absences not previously stated on my conflict list.
- Be prepared for each rehearsal with my script, pencil, dance shoes, or any other item needed at rehearsals.
- Be respectful and listen to the Director and other Ardmore Little Theatre or HFV Wilson staff.
- Refrain from being disruptive during rehearsals.
- Support fellow cast members.
- Practice my lines and choreography.
- Do not bring food or drink around the stage or the equipment.
- Pick up after myself in any spaces used throughout the building.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Initials: \_\_\_\_\_

Performance Agreement

Participant's name: \_\_\_\_\_

Release of Liability and Indemnification Clause:

I, either the Participant and/or as the parent(s) and/or legal guardian(s) of said participant, understand and acknowledge that the Participant undersigned is in good health and is able to participate in the Ardmore Little Theatre theatrical production. I confirm that the health information provided on the audition form is true, complete, and accurate. I acknowledge that I am solely and fully responsible for any and all medical and/or injury related treatment and/or expenses that otherwise relate to or arise from participation in Ardmore Little Theatre activities. In consideration thereof, I agree to release, defend, indemnify, and hold harmless Ardmore Little Theatre, director, staff, volunteers, agent, landlords, and independent contractors from any and all liability known and unknown resulting or arising out of the rendering of any and all first aid, if any, and/or illness, injury, and/or death of the Participant in any Ardmore Little Theatre sponsored production or activity.

Waiver of Usage Rights:

I give my permission to Ardmore Little Theatre to use photographs, pictures, videos, and/or sound recordings taken during Ardmore Little Theatre activities, rehearsals, and/or performances which may include me or my child in promotional materials.

By signing this document, I agree to the terms and conditions of this Performance Agreement as stated.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_