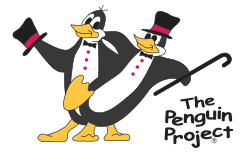


# AUDITION FORM



## Student Information

Name \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

School \_\_\_\_\_ Age \_\_\_\_\_

Shirt Size \_\_\_\_\_ Hair Color \_\_\_\_\_

Pant Size \_\_\_\_\_ Height \_\_\_\_\_

Shoe Size \_\_\_\_\_ Weight \_\_\_\_\_

Please check to confirm you have reviewed the calendar and marked any scheduling conflicts from Nov 28 - Feb 3.

## Parent/Guardian Information

Name \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

How would your family like to help?

- Support the show with snacks, water, shopping, feed the cast
- Crew the show backstage, in the booth, usher, chaperon
- Help with set, props or costumes, building, painting, crafting

Are you signing up to be an Artist or Mentor?

Any allergies or special needs which may affect your ability to perform on stage??  
If so, please let us know.

Please list, briefly, any acting experience

Please list any singing experience

Please list any additional talents (dribble basketball, cartwheel, dance training, gymnastics, music, etc...)

*For Director  
Use Only*  
Vocal Range:

Projection:

Stage Presence:

Acting Placement:

Please list in detail your schedule Nov 28-Dec 19 & Jan 4-Feb 3.  
 Include your regular weekly activities (work, school, church) and any special events.  
 Afternoon rehearsals will be 4:15-6:15pm at SAAC as listed on the calendar. Just in case  
 we need to work with individual characters, please list your schedule for the full schedule.



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
26	27	28 Rehearsal 4:15-6:15	29	30 Rehearsal 4:15-6:15  <i>Parent's Meeting 6:15</i>	1	2
3	4	5 Rehearsal 4:15-6:15	6	7  <i>Christmas Parade</i>	8	9
10	11	12 Rehearsal 4:15-6:15	13	14 Rehearsal 4:15-6:15	15	16
17	18	19 Rehearsal 4:15-6:15	20	21	22	23
24	25 <i>Christmas Day</i>	26	27	28	29	30
31	1 <i>New Years Day</i>	2	3	4 Rehearsal 4:15-6:15	5	6 Rehearsal 10-3 Mentors
7	8	9 Rehearsal 4:15-6:15	10	11 Rehearsal 4:15-6:15	12	13 Rehearsal TBD
14	15  <i>MLK Day No School EIDo</i>	16 Rehearsal 4:15-6:15	17	18 Rehearsal 4:15-6:15	19	20 Rehearsal 10-3 Mentors 1-3 Artists
21	22	23 Rehearsal 4:15-6:15	24	25 Rehearsal 4:15-6:15	26	27
28	29 <b>Rehearsal TBD</b>	30 <b>School Shows &amp; Rehearsal 4:15-6:15</b>	31 <b>Rehearsal TBD</b>	1 <b>Dress Rehearsal 7PM</b>	2 <b>Production 7PM</b>	3 <b>Production 10AM &amp; 2PM</b>

**There is no fee to participate in this project, but cast members may be asked to provide specific attire to supplement provided costumes. If there is a financial situation please speak with director or mentor coordinator.**

LIABILITY WAIVER - I understand that I hereby waive and release the South Arkansas Arts Center (SAAC), an Arkansas non-profit organization, of any and all claims, including personal injury claims, or cause action of any kind arising out of membership, activity or association with SAAC except those claims specifically covered by insurance provided by SAAC, and then only to the extent of such insurance coverage. I further understand that SAAC is not responsible for any articles lost or stolen during participation in SAAC productions or activities.

PHOTO WAIVER - I give permission to the SAAC to photograph or film my family, and use our likeness in publications created by SAAC or its affiliates. I understand that all images become the property of SAAC. I agree that this material may be published in, but is not limited to, education textbooks (including electronic versions), supplemental products, company websites, social media and advertising materials and I understand there will be no compensation. I grant the SAAC permission to edit content where necessary without review.

\_\_\_\_\_  
 Parent Signature

If under the age of 18, a parent must also sign the audition form.

\_\_\_\_\_  
 Student Signature