

THE FULL MONTY

Audition Form

(Please PRINT legibly in **INK**)

NAME: _____

MAILING ADDRESS: _____

CITY: _____ ZIP CODE: _____

PHONE: CELL()____-_____ HOME()____-_____

E-MAIL: _____

***The best way to contact me is **e-mail** _____ **cell** _____

BIRTHDATE: Month____Day____Year_____

EMERGENCY CONTACT: _____ PHONE: _____

I would like to be considered for the following roles:

Do you read sheet music? _____ YES _____ NO

Do you have any previous dance training? _____ YES _____ NO

Would you be willing to consider altering your appearance if cast in the show, for example; shaving your beard, cutting or dyeing your hair? _____ YES _____ NO

For Men Only - I am willing to dance onstage with my clothes off _____ YES _____ NO

If not cast in the show, would you like to volunteer backstage or run the light board? _____ YES _____ NO

TURN THIS SHEET OF PAPER OVER!!!

Please list up to 4 of your most recent roles (or attach resumé):

SHOW TITLE	ROLE

**Please list any known schedule conflicts
between February 15th and May 13th:**

ALL DAY EVENTS, OUT-OF-TOWN, VACATIONS, WEDDINGS, ETC.

DATES: _____

**In the calendar below, please list times you are UNAVAILABLE to rehearse:
(example - work till 6, church till 12, pottery class all day Saturday)**

SAT	SUN	MON	TUE	WED	THU	FRI

**FOR CASTING DIRECTOR'S USE ONLY
DO NOT WRITE BELOW**

Read for:

CB: _____

Notes:

PHOTO RELEASE FORM

I hereby grant Grandstreet Theatre permission to use my likeness in a photograph in any and all of its publications, including website entries, without payment or any other consideration.

I understand and agree that these materials will become the property of Grandstreet Theatre and will not be returned.

I hereby irrevocably authorize Grandstreet Theatre to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing Grandstreet Theatre's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph.

I am 18 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

(Signature)

(Date)

(Printed Name)

(Date)

If the person signing is under age 18, there must be consent by a parent or guardian, as follows:
I hereby certify that I am the parent or guardian of _____, named above,
and do hereby give my consent without reservation to the foregoing on behalf of this person.

(Parent/Guardian's Signature)

(Date)

(Parent/Guardian's Printed Name)