



AUDITION FORM July 2020

For Actors Ages 8-16

"Seussical, JR"

Name: (as you'd like it to appear in the Program) _____

Male _____ Female _____ Age: _____ Height: _____ Hair Color: _____ T-Shirt Size: _____

Parent/Guardian: _____ Parent/Guardian Phone: _____

Email address: _____ May we TEXT you? **Yes** **No**

Vocal Range: (circle) **SOPRANO** **ALTO** **TENOR** **BASS** Do you sing Harmony? **Yes** **No** Do you read music? **Yes** **No**

Past Theatre Experience: _____

Dance Experience: _____

Special skills: (Juggling, gymnastics, etc.) _____

Do you have any physical limitations? If yes, describe: _____

Role(s) Auditioning for: _____

Will you accept any role, including chorus? **Yes** **No**

If auditioning with family members, will you accept a role if others in your family are not cast? **Yes** **No**

Casting Agreement:

I agree to play any role assigned to me without complaint. In doing so, I also agree to wear the costumes, wig, and hairstyle of the director's choosing. I agree to abide by all theatre rules while at rehearsals and performances.

Actor Signature: _____

Date: _____

Attendance Agreement:

By accepting a role, I agree to attend all mandatory rehearsals and performances as defined by the rehearsal schedule.

Actor Signature: _____

Date: _____

Parent Agreement:

I understand the commitments required from my child to participate, including attendance at all mandatory rehearsals and performances as defined by the rehearsal schedule, and agree to support my child's involvement in this activity by ensuring that they are in attendance when necessary.

Parent Signature: _____

Date: _____

It is the policy of Vernal Theatre: LIVE to NOT discuss casting decisions.

All decisions are final. The cast list will be posted on our website: vernaltheatre.com.

List **ALL CONFLICTS** on calendar on **BACK** of this form, now through end of production. (Work, Vacation, etc.)

Any conflicts reported after casting may necessitate a change in role or withdrawal from the show.

Cast members may NOT have more than three conflicts and may NOT miss more than 2 rehearsals. Please mark all conflicts accurately (whether missing rehearsal or arriving late, etc) and completely.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
July 5 Auditions 6p-8p Callbacks 8:30p	6 Parent Mtg 6:30p Rehearsal @ 7p	7 Rehearsal @ 6:30p	8 Rehearsal @ 6:30p	9 Rehearsal @ 6:30p	10
12 Rehearsal @ 6:30p	13 Rehearsal @ 6:30p	14 Rehearsal @ 6:30p	15 Rehearsal @ 6:30p	16 Rehearsal @ 6:30p	17 <i>Possible 9am rehearsal</i>
19 Rehearsal @ 6:30p	20 Rehearsal @ 6:30p	21 Rehearsal @ 6:30p	22 Rehearsal @ 6:30p	23 Rehearsal @ 6:30p	24 <i>Possible 9am rehearsal</i>
26 Tech Rehearsal 7p-10p	27 Final Dress 7p-10p	28 Opening Night! @7p	29 Performance @ 7p	30 Performances @ 2p and 7p	31 Performances & Strike Night @ 2p and 7p

Notice: Rehearsals are closed to the public- including parents. Rehearsals run Mon through Fri 6:30pm – 9:30pm. As performance dates approach, Saturday mornings may be used. Show dates are **July 28, 29, 30, & 31 with two performances July 30 & 31.**

By signing below, I acknowledge that I have read the entire form and understand the commitment that I am making if I am cast. I also commit that I will be available for rehearsals and show dates as explained above. _____ Initial

CONFLICTS REPORTED AFTER CASTING MAY REQUIRE THAT YOU WITHDRAW FROM THE SHOW. READ CAREFULLY AND SIGN (A PARENT/GUARDIAN MUST SIGN).*

I understand that Vernal Theatre: LIVE is a community theatre company and that they do not carry Worker’s Compensation Insurance for cast and crew members. I accept full responsibility in the event of an accident or injury. I understand that one unexcused absence from rehearsal may result in dismissal from the show. I will be responsible for personal items (i.e. shoes, costumes, makeup, etc.). I authorize and consent that Vernal Theatre: LIVE shall have the absolute right to publish, use, or sell all photographs or videos taken of me as a participant in the above production. I have read and understand the information above.

**As the parent/guardian of the auditionee, by signing below I confirm that the calendar above is correct to the best of my knowledge and commit to the show and guidelines along with my child. I understand that failure to adhere to these requirements may result in dismissal from the show.*

Signature: _____ **Date:** _____

Parent/Guardian Signature: _____

THANK YOU FOR AUDITIONING.

Vernal Theatre: LIVE is an amateur theatre company which produces plays and musicals at Vernal Theatre: LIVE. Any member of the community is welcome to audition for all roles in all shows. All performers and crew members are volunteers, seeking training and/or a performance outlet.

CAST CONTRACT

As a member of the cast:

1. I agree to attend all rehearsals for which I am scheduled.
2. I will remain at rehearsals until the rehearsal is completed or I am excused.
3. If I must miss a rehearsal for any reason not marked on my audition calendar, I will personally contact the Stage Manager prior to the beginning of the rehearsal.
4. If I miss a rehearsal and do not contact the Stage Manager, I understand that my lack of consideration is enough for me to be dismissed from the show entirely.
5. If I miss more than two rehearsals for any reason, I understand that I will lose my role.
6. I agree to assist with the production of the show in any capacity.
7. I agree to meet "off book" deadlines by having lines & songs memorized.
8. I understand that I may be personally responsible for parts of my costume.
9. I understand that I am part of a team effort, so I must have a positive attitude, even on days when I have a million reasons to not be open-minded and willing to work.
10. I understand this show requires collaboration, and I agree to contribute my ideas and energy at appropriate times.
11. I understand the Director will make final choices pertaining to my role(s).
12. I agree to do all that I can to make rehearsals the best they can be.
13. I understand that during rehearsals and backstage during performances, I am to remain quiet and respectful of others until my part begins.
14. If I cause problems by disrupting the cast or the Director during rehearsal, I understand that I may lose my role in the show.
15. I understand that all rehearsals and shows are a Vernal Theatre: LIVE function; thus, all theatre policies will be strictly enforced.

As a parent/guardian of a cast member:

1. I understand that there is a \$25 fee + \$5 per additional family member to participate in *Seussical, JR* and agree to pay that amount upon arrival at the mandatory parent meeting, Tuesday, July 6 at 6:30pm.
2. I agree to ensure my cast member is 10 minutes early to all rehearsals and that they meet other deadlines (such as "off book", costume, hair, etc).

I have read and agree to these terms.

STUDENT _____

DATE _____

PARENT _____

DATE _____