



# AUDITION FORM

Audition Time: \_\_\_\_\_

Please fill out this form completely. Correct any pre-filled information that is wrong.

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

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email (required) \_\_\_\_\_ Home Phone: \_\_\_\_\_

All communication regarding casting will be done by email, therefore please make sure your email address is correct and legible. Your email will be kept private and will only be used by HCTO for theater related information. PLEASE DO NOT CALL THE OFFICE.

M  F  Age \_\_\_\_\_ Birth Date \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair Color \_\_\_\_\_

Vocal Part - Soprano  Alto  Tenor  Bass  Have you performed at HCTO previously? Yes  No

**Staple resumes and headshots to this form.** If you do not have a resume, please list experience on the back of this form.

**Please list all conflicts you have between today and May 27th below:**

3 BETTY BLUE EYES April 20 - May 27						
M	M	T	W	Th	F	S
APRIL						
					15	
17	18	19	20	21	22	22
						3:00pm
24	25	26	27	28	29	29
					11:00am	3:00pm
MAY						
1	2	3	4	5	6	6
					11:00am	3:00pm
8	9	10	11	12	13	13
					11:00am	3:00pm
15	16	17	18	19	20	20
				4:00pm	11:00am	3:00pm
22	22	23	24	25	26	27
4:00pm					4:00pm	11:00am

*From time to time it becomes necessary to add additional performances due to demand for tickets. The following dates are being held for additional performances if the need arises:*

- Possible Additional Performance #1:** Monday, May 15th, 2017 at 4:00pm
- Possible Additional Performance #2:** Tuesday, May 16th, 2017 at 4:00pm
- Possible Additional Performance #3:** Wednesday, May 17th, 2017 at 4:00pm
- Possible Additional Performance #4:** Thursday, May 18th, 2017 at 4:00pm

Are you willing to be single cast? Yes  No  (This means performing each and every performance instead of alternating. See performance schedule.)

What is your casting preference Single Cast  Double Cast  No Preference

Are you willing to accept any role? Yes  No

If no, which role(s) would you accept? \_\_\_\_\_

Do you play a musical instrument? Yes  No  If yes, which instrument(s)? \_\_\_\_\_

Are you a member of Actors' Equity? Yes  No

Have you ever been charged with a felony Yes  No

Hale Center Theater Orem provides an excellent environment with quality production staff to give actors a rewarding experience. You will be contacted if you are cast.

**PLEASE DO NOT CALL THE OFFICE.**

I understand that actors perform on a volunteer basis, but will receive \$20 per performance for those that are double cast and \$30 per performance for those that are single cast. (Children 15 and under receive \$10 for double cast, \$20 for single cast.) (These rates are subsidized in part thanks to a generous grant from the Orem City CARE tax.)

I authorize and consent that Hale Center Theater Orem shall have the absolute right to publish, sell, or assign any and all photographs taken of me as a participant in its productions.

**I agree that from this point forward until the end of the run I will not cut or color my hair without approval from the hair and makeup department.**

I have read and understand the information above (If under 18, a parent or guardian must sign.)

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