

# AUDITION FORM

## “MATILDA THE MUSICAL”

### WATERVILLE PLAYSHOP

#### APRIL 24-26<sup>TH</sup>, 2020

PLEASE PRINT:

\*PLEASE LIST ALL SCHEDULING CONFLICTS ON THE BACK OF THIS FORM

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ GRADE IF APPLICABLE: \_\_\_\_\_

HEIGHT: \_\_\_\_\_ PHONE#: \_\_\_\_\_

PARENT'S NAME (If under 18): \_\_\_\_\_ ADD'L PHONE#: \_\_\_\_\_

PERSONAL EMAIL ADDRESS (Parents email if under 18): \_\_\_\_\_

SECOND EMAIL ADDRESS: \_\_\_\_\_

PLEASE LIST ALL PAST DANCE EXPERIENCE:

\_\_\_\_\_

PLEASE LIST ALL PAST THEATRE EXPERIENCE: (Please use the back of this sheet for more space or attach a resume)

\_\_\_\_\_

PLEASE LIST ALL SCHEDULE CONFLICTS ON THE BACK OF THIS FORM:

*Often times, the director needs to make difficult decisions in relation to casting. I understand that by auditioning for “Matilda the Musical”, I am not guaranteed a spot in the show. Rehearsal time is crucial to the entire cast. I understand that if I or my child should miss 2 or more rehearsals without first discussing the absences with the director, then my I will not be allowed to perform. I understand that the director will email me regarding the outcomes before Friday, February 21<sup>st</sup> and I will attend the first rehearsal from 4-7pm on Sunday, February 23<sup>rd</sup>. I understand that if I or my child is cast in “Matilda the Musical”, then I will be asked to pay a non-refundable \$35 costume fee as well as a \$25 script deposit that will be returned upon returning script in same condition.*

PARENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CHILD'S SIGNATURE (if under 18): \_\_\_\_\_ DATE: \_\_\_\_\_

**Administrative Use Only; Do not write below this line:**

**Song:** \_\_\_\_\_

**Role:** \_\_\_\_\_

**Notes:**