



Audition Form

Billy Elliot

Please fill out both front and back completely.

Contact Information:

Name: (As you would like in printed in the program) _____

Address: _____

Phone #: _____ E-Mail: _____

The number at which I am most likely to be reached for a callback: _____

E-mail address for play-related correspondence: _____

Place of Employment/School _____

Background Information:

Birth date: (required if under 18) _____ -OR- Age range you can play: _____

Do you sing? Yes No Range: (or vocal part) _____

Do you have dance training? Yes No What type?: _____

Do you play an instrument? Yes No What kind? _____

Do you have any special skills such as juggling, tumbling, stage combat, dialects etc? Yes No

Please List: _____

I am willing to cut my hair _____ color my hair _____ to suit the artistic design of the show.
(Y/N) (Y/N)

Do you have any tattoos and/or piercings that would be visible from the stage? Yes No

Please List: _____

If you are auditioning with a family member, please check and/or fill in the appropriate lines:

I am auditioning with _____.

____ I understand that our decision to audition together does not influence the decision of the director.

____ We are a package deal; either we are both cast or neither of us wishes to participate.

____ I will accept a role regardless of my family member's participation.

____ My family member will accept a role regardless of my participation.

Previous Theatrical Experience: (Your favorite three)

Production	Character	Theatre or Company

Rehearsals:

- Initial rehearsals will be held Mondays-Fridays between the hours of 6:00-10:00 pm.
- Exact rehearsal schedules will be determined by casting.
- Tech and dress rehearsals will begin on Thursday, Septembere 27 , Time TBD

Actor Name: _____

- Starting Sep 27, all rehearsals are mandatory and no conflicts will be accepted.

Performances:

- Performance dates are October 5-28, 2018.
- Curtain time is 7:30 p.m. for Thursday-Saturday evening performances.
- Sunday matinees are at 2:00 p.m.
- Actor call times for performances will be determined prior to tech week.

Available Roles: Please indicate any roles that you are interested in being considered for. By signing this audition form, you agree to accept any role offered.

Role		Role	X
Role		Role	
Role		Role	

Have you auditioned at the Playhouse before? _____

Many Playhouse productions require the climbing of stairs, dance numbers and other physical demands. If you will need accommodations because of an injury or disability, please list those accommodations here:

Technical Positions:

We are always looking for help behind the scenes as well. In the event you are not cast, please check any areas you are interested in helping out with. (Answers will have NO BEARING on casting decisions.)

Position:	X	Position:	X
Set Construction		Stage Management	
Scene Painting		Stage Crew	
Light Board Operator		Props	
Sound Board Operator		Asst. Stage Manager	
Usher/Concessions		Costume Construction	
Costume Crew		Other:	

Disclosure If cast in this production I understand:

- A majority of correspondence from the Playhouse will arrive by e-mail and that it is important to check it daily.
- I may be asked to provide some costume and/or make-up items as requested by the costume designer.
- I will not change my hair style or color until receiving approval of the costumer. Also, my hair may need to be cut or styled to be appropriate for the character.
- All performers may be called upon to assume some technical responsibilities as needed.
- This production may contain material that I find objectionable. However, I commit to performing my role regardless of any bias or personal conviction.
- That I consent to have my name and/or likeness used in publicity relating to this production, theatre, and the photographer hired to take said photos. This includes print, television, and web based media.
- That I agree to put in six volunteer hours on sets and/or costumes outside of rehearsals.
- As part of the Playhouse policy, I give permission for a criminal background check to be performed in the interest of safety for all volunteers and patrons of the theatre.

Actor Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

(Required if actor is under the age of 18)

Thank you for auditioning at the Playhouse. Have fun and break a leg!

Our Mission

The mission of the Des Moines Community Playhouse is to change lives by entertaining, enriching and engaging the people of our community through producing high-quality theatrical presentations, avocational experiences, and life-long educational opportunities.