

I am auditioning as (circle all that apply) Actor Production Position: _____

Name: _____

Parent's/Guardian's names (for students under 18): _____

Home phone: _____ Cell phone: _____

E-mail address: _____

Year in school: _____ Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

Do you have a monologue prepared? (Not required.) YES NO

Have you acted in a major role (a lead character) before? YES NO

Have you acted in a full-length play before? YES NO

CIRCLE ALL the types of theatre have you done. Children's, High School, Community, Professional

CIRCLE ALL of the following you have attended. Acting Class, Acting Workshop, Acting Camp

I will accept any role (including a male role to be played by a female). YES NO

I would prefer the following roles: 1. _____ 2. _____ 3. _____

I will NOT accept the following roles: 1. _____ 2. _____ 3. _____

If you are not cast, please consider being a part of the rehearsal crew or technical staff.
Please indicate how you would be interested in helping if not cast.

Stage Management

Rehearsal assistant

Publicity

Scenery

Props

Lighting

Sound

Costumes

Please inform other students/adults ESPECIALLY FAMILY/FRIENDS of our need for help – especially for technical assistance. Help us get others involved!

ON THE OTHER SIDE, LIST ALL CONFLICTS ON THE CALENDAR, THEN SIGN THE AUDITION SHEET.

A "CONFLICT" IS ANYTHING TO WHICH YOU ARE ALREADY COMMITTED TO DOING AND WILL PREVENT YOU FROM BEING AT REHEARSAL.

For example; sports, classes, Marching Band, a job, church related activities.

I will work around conflicts as best as possible, but I need to know NOW.

••• Adding conflicts AFTER you are cast MAY get you removed from the cast. •••

On the date of the conflict, list the time and event you are committed to.

For example: Pep Band 6-9 PM

THE CALENDAR SHOULD BE CLEARED DEC. 20 - 22
AS WELL AS JANUARY 4 (afternoon) - 11

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
OCT. 12	13 Crew Interviews 3:30-5 Auditions 6 - 9 pm	14 Crew Interviews 3:30-5 Auditions 6 - 9 pm	15 Callbacks as needed 3:30 - 5:00 pm	16	17 Cabaret Rehearsal	18 Cabaret
19 Cabaret	20 ALL CAST READ THROUGH 6-9 pm	21	22	23 No School	24 No School	25
26	27	28	29	30	31	NOV. 1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27 Thanksgiving Break	28 Thanksgiving Break	30-Jan
30	1-Dec	2	3	4	5	6
7	8	9	10	11 Band/Choir Concert	12	13
14	15	16 John Muir Concert	17	18 Endeavor Concert	19 Lewiston Concert	20
21	22	23 Early Out	24 Christmas Break	25 Christmas Break	26 Christmas Break	27 Christmas Break
28 Christmas Break	29 Christmas Break	30 Christmas Break	31 Christmas Break	JAN. 1 Christmas Break	2 Christmas Break	3
4 Afternoon Rehearsal	5 Dress Rehearsal	6 Dress Rehearsal	7	8 Dress Rehearsal	9 Performance 7:30	10 Performance 7:30
11 Performance 2:00	12	13	14	15	16	17

SIGNATURE _____

JANUARY PLAY

PARENT PERMISSION SHEET

I hereby give my permission for my child, _____, to audition for the January theatre production at Portage High School. I have done the following (please X each box):

- ☐ I have looked over my child's conflict schedule and to the best of my knowledge this constitutes ALL of my child's commitments.
- ☐ I have talked with my child about the importance of time management and the priority of school. It is expected that everyone involved in the production will continue to do their best academically.
- ☐ I have talked with my child about the importance of following through on a commitment, and expect them to be committed to this activity if cast in the show or crew. This includes giving the best effort at all times, as well as making rehearsals a priority. This may mean missing other activities because of rehearsals.
- ☐ I understand that it is my responsibility, along with my child, to ensure that the child is at rehearsals on time, ready to go (this means they have everything they need – usually just their script and a pencil, but occasionally something else.)
- ☐ I understand that part of my responsibility as the parent of a student actor is to ensure that they have access to snacks and meals so they can focus during rehearsal time. If this is a concern for any reason, please call the director.
- ☐ I understand that I, or another parent/guardian, is asked to be present on Monday, October 20th at 6:00 pm in order to meet the director, get additional information, and if desired, sit in on the read-through of the script.
- ☐ I understand that while most rehearsals have a definite end time, the last couple weeks may require additional time (even though a target end time is provided).

Signed: _____ Date: _____

Printed Name: _____

If you have any questions or concerns, you may contact me at your convenience:

608-332-8257 (cell phone/text) or strains@charter.net

Patrick M. Strain – Theatre Director/Designer