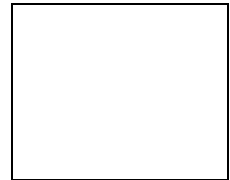




9 Princess St. E.,
Waterloo, ON N2J 2H4

Live Theatre in Your Community!



AUDITION FORM: [title of show]

PERSONAL INFORMATION

Name : _____

Phone Number : _____ Cell?() Age: _____ Height : _____

Email Address : _____

Home Address: _____ City: _____ Postal Code: _____

If cast, do you give permission for KWLT to share your phone number and email with the cast and crew?
(If 'no', the information will only be given the director, producer and stage manager. Either way the information will be shared with the KWLT Membership Director for your KWLT Membership.)

Phone number: Yes No Email Address: Yes No

Would you prefer to be contacted about this show through: Phone Email

Would you like your email address to be added to our Announce list to find out about other local theatre events? Yes No

COMMITMENTS AND AVAILABILITY

Mark all of the following timeslots when you can be available for rehearsals. The directors may use availability in casting decisions when there is a choice between two actors.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1pm – 4pm							
4pm – 7pm							
7pm – 10pm							

Please list any prior commitments which would prevent you from attending rehearsals/shows in the period between Mar 22 – Jun 27. Please be as specific as possible.

READ-THROUGH

Will you be available for a read-through on Mar 22 from 2:00pm – 5:00pm?

Yes No

KWLT MEMBERSHIP

Are you a KWLT member? Yes No

To be part of any show you must be a member of KWLT. The cost is \$10 per production
OR \$15 per year OR \$25 per family.

If no, are you willing to become a member and pay the fee? Yes No

VOCAL RANGE

Please describe your vocal range (if you know it).

VOCAL EXPERIENCE

Please describe any vocal education and/or performance experience you have. (You may use the end of this audition form for additional space if needed.)

DANCE EXPERIENCE

Please describe any dance education and/or performance experience you have. (You may use the end of this audition form for additional space if needed.)

SPECIAL SKILLS

Please list additional relevant stage performance skills you have (eg. actor training, stage combat, etc.) (You may use the end of this audition form for additional space if needed.)

PREVIOUS EXPERIENCE			
Please list any other relevant theatre experience below (max 5 shows).			
<u>Play</u>	<u>Role</u>	<u>Year/Season Produced</u>	<u>Production Company</u>

ADDITIONAL QUESTIONS	
On a scale from 0-4, how well can you read sheet music? (0 being not at all.)	0 1 2 3 4
Are you comfortable with removing your shirt on stage (briefly)? (Female actors would be wearing a bra.)	Yes No
Female auditioners: Are you comfortable with kissing a female actor on stage?	Yes No

OTHER WAYS TO GET INVOLVED	
If you were not cast for the show, would you be interested in doing: (check all that apply)	
<input type="checkbox"/> stage-manage <input type="checkbox"/> make-up <input type="checkbox"/> props <input type="checkbox"/> costumes <input type="checkbox"/> set construction <input type="checkbox"/> general tech <input type="checkbox"/> publicity <input type="checkbox"/> lights <input type="checkbox"/> sound	

Please list previous *offstage* theatrical work.

How did you find out about this audition?