



COUNTY PLAYERS, INC.

Reading #1 GRAND CONCOURSE

Friday, March 4 at 8pm

Saturday March 5 at 2pm

Reading #2 UNCANNY VALLEY

Saturday, March 5 at 8pm

Sunday, March 6 at 2pm

NAME _____ PHONE(D) _____ (E) _____

E-MAIL _____ CELL PHONE _____

EMERGENCY CONTACT _____ CELL PHONE _____

HEIGHT _____ HAIR COLOR _____ PRONOUNS _____

What character(s) do you prefer?

1. _____ 2. _____ 3. _____

Would you accept any other member of the cast beside the ones you listed? YES _____ NO _____

BRIEFLY state your theatrical experience (if you need more room, use the back):

ROLE	SHOW	ORGANIZATION	YEAR
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If you are cast in this production, you may be asked to assist in any production aspect (set construction, hanging lights, painting, etc.) Please state technical preference: _____

If you are not cast in this production, will you help on the production staff? _____ If yes, please list areas of expertise and/or interest: _____

Rehearsals will be held 3-4 times a week, except for Production week. IT IS IMPERATIVE THAT EACH CAST MEMBER BE PRESENT AT ALL REQUIRED REHEARSALS. Consider your time commitments. List all the expected things that might keep you from ANY rehearsals (holidays, work, vacations, night classes, business trips, meetings, etc). PLEASE BE HONEST! Emergency absences may occur, but repeated instances will result in recasting. In case of emergency, early notification is expected to the director or the stage manager. Contact phone numbers will be provided.

RELAX, ENJOY AND BREAK A LEG!

Please sign this form indicating you have reviewed its contents.

SIGNATURE

PRODUCTION STAFF NOTES: COMMENTS: _____

(Musicals only)

Vocal Range: _____ Volume: _____ Pitch: _____

Ability to move: _____ Stage Presence: _____ Physical Type: _____

Character readings:

