



NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

E-MAIL \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_

HEIGHT \_\_\_\_\_ HAIR COLOR \_\_\_\_\_ PREFERRED PRONOUNS \_\_\_\_\_

What role(s) do you prefer?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Would you accept any other role of the cast other than what you listed? YES \_\_\_\_\_ NO \_\_\_\_\_

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

ROLE	SHOW	ORGANIZATION	YEAR

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: \_\_\_\_\_

**IMPORTANT NOTE** : YOU MAY BE ASKED TO **PROVIDE/PURCHASE** THE NECESSARY **FOOTWEAR** NEEDED FOR THIS SHOW. In addition, you are expected to provide basic wardrobe items such as shoes, jeans, t-shirts, and any undergarments.

Rehearsals will be held 1 - 2 times a week, except for final week. **IT IS IMPERATIVE THAT EACH CAST MEMBER BE PRESENT AT ALL REQUIRED REHEARSALS.** Consider your time commitments. On the other side, indicate all the expected conflicts 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.

By signing, you give County Players, Inc. permission to use your image and/or voice for promotional and archival purposes.

RELAX, ENJOY AND BREAK A LEG!

How did you hear about auditions?

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_

PRODUCTION STAFF NOTES: COMMENTS: \_\_\_\_\_