

AUDITION FORM

# Hairspray Jr

September 6-8, 2018 (no Sunday performance)

Marie W. Heider Center for the Arts

A Community Theatre production, sponsored by the WSHS Drama Dept.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL (where we should send the rehearsal calendar): \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE \_\_\_\_\_

(Students only) PARENT'S NAME \_\_\_\_\_ Parent Cell: \_\_\_\_\_

If you are a student, what grade will you be entering in Sept 2018? 7th 8th FR SOPH JR SR

\_\_\_\_\_ Male \_\_\_\_\_ Female

**What role(s) do you want to be considered for?**

\_\_\_\_\_ Chorus role only \_\_\_\_\_ Chorus or Principle Role \_\_\_\_\_ Tech Crew

**Theatrical Experience** (Please list plays/musicals and the roles that you have been involved in)

---

---

---

---

---

---

---

---

---

---

**Dance Experience** (ballet, tap, jazz etc; plus # of years of training)

---

---

---

---

---

---

# Rehearsal Availability

Rehearsals will begin mid-July.

When would you be available to rehearse during the week? Please check ALL that would work for you.

| <u>MONDAYS</u>                       | <u>TUESDAYS</u>                      | <u>WEDNESDAYS</u>                    | <u>THURSDAYS</u>                     |
|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> 8 am - noon |
| <input type="checkbox"/> 1-5 pm      |
| <input type="checkbox"/> 7-10 pm     |

Are there any days that you know will NOT work for you in mid-July-end of August? (i.e. vacation on July 30-Aug 1 or appointment on August 1 from 10-11 am).

---

---

---

---

---

Tech rehearsals will be held from 7-10 pm August 27-28-29-30 and September 3-4-5. These are MANDATORY rehearsals. Will you be able to make these mandatory rehearsals?  Yes  No

Once we know everybody's availability, we will put together a rehearsal schedule. Will you schedule appointments and work (if possible) around the rehearsals you are scheduled for?  Yes  No

Please sign below, so we know you have read all of the information above and agree to give 100% to this production.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

If you are a student, please have your parent sign below, indicating that they understand what you have committed to above.

Parents...please make EVERY effort to drop off AND pick your children up from rehearsal ON TIME! (Thank you)

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_