

# QCT AUDITION FORM

PRODUCTION:

DATE of AUDITION:

Name: \_\_\_\_\_ Pronouns: \_\_\_\_\_

Height: \_\_\_\_\_ Age: \_\_\_\_\_

## If under 18:

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Phone Number : \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Phone Number : \_\_\_\_\_

Student E-mail Address: \_\_\_\_\_

Parent E-mail Address: \_\_\_\_\_

Actor's Phone Number: \_\_\_\_\_

Actor's E-mail Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I give QCT permission to send me its newsletter, as well as information about:

Auditions    Classes    I only want to receive emails regarding my involvement in this specific show

If cast, will you accept any role? YES \_\_\_\_\_ NO \_\_\_\_\_

If no, what are the only roles you will accept, or what stipulations do you have in accepting a role (e.g. I will only accept a role if my family member is cast) \_\_\_\_\_

List any and all conflicts you might have during the rehearsal or performance period

*(Be specific with dates and times. Include work, school, vacations, extracurricular activities, etc. Note if you have daytime availability):*

How did you hear about auditions? \_\_\_\_\_

**ADULTS AND OLDER STUDENTS:** Would you be willing to work in any of the following production areas:

\_\_\_ Set Construction   \_\_\_ Crew   \_\_\_ Costumes   \_\_\_ Lighting   \_\_\_ Props   \_\_\_ Ushering/Box Office

## Audition Questions

1) There is a kiss between Slightly and Wendy and a kiss between Peter and Wendy. If you would like to be considered for these roles, are you willing to participate in this rehearsed stage intimacy?

Yes\_\_\_ No\_\_\_

(You can still be considered for all roles if you say you are not comfortable with onstage intimacy; we want to meet everyone at their own comfort levels.)

2) Please share any movement background. This can include dance, physical theater, or specific sports you have played.