

AUDITION APPLICATION
Something Rotten!
Director: Kathleen Cassidy

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| Name (print clearly please) | |
| Address | |
| Phone (home) | |
| Phone (cell) | |
| Email | |
| Emergency Contact | |

Please list below the role(s) that interest you:

Is there any role(s) you would not take if offered?

If not cast, would you be interested in helping with the production and if so how (e.g., make-up, wardrobe, ASM, set building, etc.)

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If you have relevant previous performance and/or dance experience, please give examples below:

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PLEASE COMPLETE PAGE 2 - - -

Are you a member of Actor's equity?

- Yes
 No

Are you currently a paid member of OSLT?

- Yes
 No, but I understand and agree to pay the OSLT \$20 membership fee
 I understand Criminal Record checks are required (at no cost) for all new OSLT members and/or all current OSLT members must sign a Criminal Record Waiver.

I understand that the production team may take my picture and or video my audition for selection purposes.

I authorize OSLT/Roxy Theatre to have and use photographs, video recordings, and comments of the person(s) named on this application as needed in promotional materials and public relations programming.

Under 18 – I understand that if I am cast, I will need parental permission to be part of this show.

Attendance at rehearsals is very important. The rehearsal schedule is attached/linked [here](#). Please look at it carefully. Do you have any commitments that would conflict with the rehearsal schedule?

- No
 Yes – please list dates when you will not be available:

If you have sung harmony before, please indicate which part(s) you are able to sing.
 Soprano 2nd Soprano Alto Tenor Baritone Bass Don't know

What is your vocal range if you know it?

Signature _____ Date _____

Guardian/ Parent Name (if person auditioning is under 18) _____

Contact number _____

Signature _____

Thank you for coming!