



AUDITION FORM 2020-2021

NOTE: Nonrestrictive Casting. Roles are open to all actors, regardless of race, ethnicity, gender, or physical type.)

(Please mark the show you are auditioning for.)

\_\_\_The Musical Comedy Murders of 1940 - SEPT 10-20 (Please remit form by email by July 11)

\_\_\_Bad Seed - OCT 29-NOV 3 (Please remit form by email by August 28)

\_\_\_Communicating Doors – JAN 7-17 (Please remit form by email by October 30)

\_\_\_Joseph & the Amazing Technicolor Dreamcoat – APR 1-11 (Please remit form by email by January 22)

\_\_\_Dearly Beloved – JUNE 3-13 (Please remit form by email by April 2)

(\*Required Fields)

\*NAME: \_\_\_\_\_ GENDER: \_\_\_\_\_ AGE RANGE: \_\_\_\_\_

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

\*CITY: \_\_\_\_\_ \*STATE: \_\_\_\_\_ \*ZIP: \_\_\_\_\_

\*CONTACT NUMBER: \_\_\_\_\_

\*CONTACT EMAIL ADDRESS: \_\_\_\_\_

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

Role(s) you would like to audition for: \_\_\_\_\_

Will you accept any role? \_\_\_\_\_

Are you willing to change your hair style or color? \_\_\_\_\_

List any crew positions which interest you: \_\_\_\_\_

Are you willing to head a crew? \_\_\_\_\_

Please list physical limitations, if any: \_\_\_\_\_

List all scheduling conflicts, being as specific as possible regarding dates and times:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Skills: \_\_\_\_\_  
\_\_\_\_\_

Please attach a resume or list prior experience. Attach a headshot if available.

*NOTE: If there are children in the cast, all volunteers over 18 years of age are required to have a background check.*

*(Please initial)*

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\_\_\_\_ I understand that if cast, I will be responsible for my own make-up requirements (unless specialty make-up is needed), as well as some costume requirements.

\_\_\_\_ I have listed all known dates when other commitments will prohibit my attendance at rehearsals or set build days.

\_\_\_\_ I understand that continued absence or failure to be on time could merit my replacement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*(You may sign and date at auditions)*

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*(After completion, save this form with your name and email with attachments to  
CityTheatreAuditions@gmail.com)*

Please do not write below this line

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