

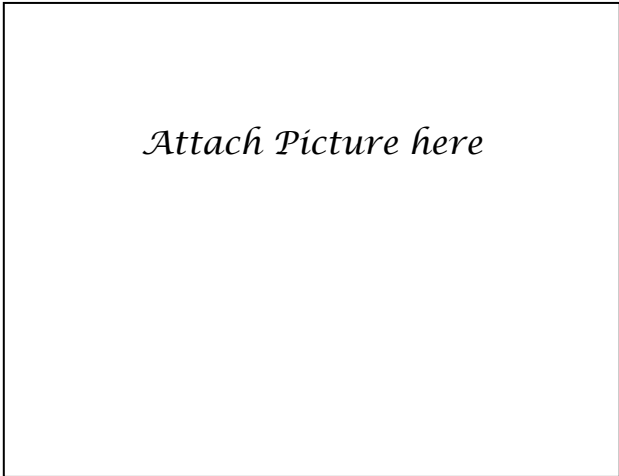


SMITHFIELD LITTLE THEATRE --AUDITION FORM

Miracle on 34<sup>th</sup> Street

Please print clearly

DATE: \_\_\_\_\_
NAME: \_\_\_\_\_
ADDRESS: \_\_\_\_\_
CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_
HOME PHONE: (\_\_\_\_) \_\_\_\_\_
CELL PHONE: (\_\_\_\_) \_\_\_\_\_
E-MAIL: \_\_\_\_\_



Are you auditioning for a specific role? If yes, what role? \_\_\_\_\_

Would you be willing to work in a different capacity on this show (Stage, costumes, props, make-up, lights, etc.)? \_\_\_\_\_

If so, what? \_\_\_\_\_

List any Theatre experience:

Production: \_\_\_\_\_ Role: \_\_\_\_\_ Theatre Group: \_\_\_\_\_
Production: \_\_\_\_\_ Role: \_\_\_\_\_ Theatre Group: \_\_\_\_\_
Production: \_\_\_\_\_ Role: \_\_\_\_\_ Theatre Group: \_\_\_\_\_

OTHER: \_\_\_\_\_

Please enter any conflicts you may have during rehearsals:

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

Use back of page if needed .....

\*\*\*\*\* PLEASE NOTE: \*\*\*\*\*

- You must be available BOTH nights of Auditions
Individuals under the age of 18 will be required to submit a signed Parental Signature form (Provided at Auditions)
First rehearsal is: Monday, September 30, 2019 @ 7 pm/ Read-thru: Thursday, Sept. 26
No Acapella: You provide track or piano accompanist
Rehearsal Calendar will be provided at Auditions
Show dates: December 5-15, 2019
Friends & Family show: Monday, December 2
Tech Week (everyone must be available!): November 17-21, November 24-26

\*\*\* PLEASE INFORM STAFF IF YOU HAVE ANY TYPE OF ALLERGY THAT WILL IMPACT CAST OR CREW \*\*\*