

VALLEY CENTER Community Theater

P.O. Box 1672, Valley Center, CA 92082

AUDITION FORM

Anyone cast in a VCCT production is expected to be a member of VCCT. In lieu of actor's fees, you will be required to pre-purchase tickets to the show. You may resell these tickets or give them to your friends and family. You will also be required to pay for your script and a nominal Insurance Fee. Depending on the show, you may be required to contribute financially to your costume. If cast, please come to the first rehearsal prepared to pay for these items and complete all paperwork. For specific financial/time requirements, please refer to the "Actors Commitment Form" for the show you are auditioning for.

Name: _____ Email _____

Address: _____

Daytime phone: _____ Evening phone: _____ Cell Phone: _____

How did you hear about these auditions? _____

Role(s) desired: _____ Accept any other? _____

Age Range: _____ Height: _____ Weight: _____ Hair color: _____ Skin tone: _____

Will you cut hair? **Y N** Color hair? **Y N** Wear a wig? **Y N** Men: grow/shave mustache/beard? **Y N**

Vocal range _____ Dance skills _____ Musical Instrument _____

Please list last show, role, theater and director: _____

Please attach resume/headshot or list of most recent productions on back of this sheet (if any)

Experience: Number of shows in which you've had roles: 0; 1-4; 5-10; 10-15; 16+

Do you have any special stage/theatre training? _____

IMPORTANT: Are you, or a family member, willing to crew or help in another capacity? **Yes No**

If yes, what capacity? Props _____ Set building _____ Set painting _____ Costumes _____

Promotions _____ Selling Tickets _____ Kid Wrangler _____ Other _____

Please note below any conflicts you have or may have with the current rehearsal/performance schedule:

***See details for the show you are auditioning for.**

THEATRE USE ONLY

Comments: _____

Callback: _____ Role: _____