

Journey Theater Audition Form

Call Back: YES NO

Audition # _____

Cast: _____ Parent Committee _____

-----Please DO NOT write above this line-----

Audition Song _____ Audition Monologue _____

Check here if you'd like feedback on your audition

Student Information (Fill in COMPLETELY)

Please bring a current photo of yourself, 4x6 is the preferred size

Name _____ Parent Phone _____

Parent Names (First & Last) _____ Parent Email _____

Age ____ Height _____ Hair Color _____ Female Male This is my first Journey show

Class Night: M T Journey Class _____

Other talents (i.e. tap, ballet, gymnastics, etc): _____

Are you willing to change your hair for the show? Yes No

Student Conflicts

I am auditioning for:

____ **Spooky Journey: NO CONFLICTS** ____ / I have conflicts on the dates that are circled:

Sept 30, Oct 1, 2, 7, 14, 21, 28, 29, 30

____ **Wizard of Oz Audio Play: NO CONFLICTS** ____ / I have conflicts on the dates that are circled:

October 8, 9, 15, 16, 22, 23, November 5, 6, 12, 13, 19, 20

____ **Journey Carolers: NO CONFLICTS** ____ / I have conflicts on the dates that are circled:

September 25, October 2, 8, 9, 15, 16, 22, 23, 30, November 5, 6, 12, 13, 19, 20

If your child is cast, they will be excused from conflicts listed above.

Parents MUST participate on a committee related to the performance their student is cast in.

Note: Withdrawal from the show after casting may result in ineligibility to audition the next session the student is enrolled.

Parent Responsibilities

- Make sure your child is at all scheduled rehearsals and performances.
- Notify Show Coordinator in case of illness.
- Serve on Parent Committee(s) as required.
- Pay a Production fee, per child cast; as well as other required fees (on Show Fee List)

Name of parent who will be volunteering (please print) _____

Parent Signature _____