

# Central Texas Theatre Audition Form

at Vive Les Arts Society

Please fill out and return to stage manager.

Time Slot: \_\_\_\_\_ or Arrival Time (Walk-in): \_\_\_\_\_

Show: \_\_\_\_\_

**\*ALL PERFORMERS ARE SUBJECT TO A BACKGROUND CHECK\***

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

*\*Future production information may be sent to you via email.\**

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Height: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Voice Type: Soprano Mezzo Alto Tenor Baritone Bass Range (If Known): \_\_\_\_\_

Role Auditioning For: \_\_\_\_\_

Other Roles You Wish to Be Considered For: \_\_\_\_\_

*If Under 18 Years of Age - Name of Parent/Guardian:* \_\_\_\_\_

*Parent/Guardian Phone Number:* (\_\_\_\_\_) \_\_\_\_\_

***By signing I signify that my child has permission to participate in this production at Central Texas Theatre.***

**X** \_\_\_\_\_

Formal Training (If Applicable): \_\_\_\_\_

Recent Theatrical Experience

Date/Year	Show	Role	Organization

If you are not cast but would still like to be a part of the production, please circle any areas of interest:

Stage Management

Props

Sound

Makeup

Set Construction

Lights

Costumes

Other: \_\_\_\_\_

Please list ALL conflicts you may have between now and the opening of the play.

\_\_\_\_\_

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Vive Les Arts Theatre



@vla\_killeen



@centraltexas theatre

**PHOTO RELEASE**

\_\_\_\_\_ I grant Central Texas Theatre at Vive Les Arts Societe permission to take videos and/or photographs of me (or my child) during the rehearsal and performance process for this production. I understand that these videos and/or photographs may be used for promotional and marketing materials for Central Texas Theatre, including but not limited to use on Central Texas Theatre at Vive Les Arts Societe's website (vlakilleen.org) and their social media platforms.

\_\_\_\_\_ I DO NOT grant Central Texas Theatre at Vive Les Arts Societe permission to take videos and/or photographs of me (or my child) during the rehearsal and performance process for this production.

Participant's Name \_\_\_\_\_

Signature of Participant (or Legal Guardian if Participant is Under 18 Years of Age)

X \_\_\_\_\_ Date \_\_\_\_\_