

PICKERINGTON COMMUNITY THEATRE AUDITION FORM (bring to auditions)
"SHREK, The Musical" Show Dates July 11,12,13,18,19,20 2025
Fridays and Saturdays at 8pm, Saturdays and Sundays at 2pm at the Violet
Township Theatre

DATE: _____

Audition #:

NAME: _____ AGE: _____ Height: _____ Gender _____

ADDRESS: _____

PHONES: _____

EMAIL: _____

PARENT NAME AND NUMBER IF YOU ARE UNDER 18: _____

Parent Email: _____

Theater Experience: (Acting / Dancing & style like tap, jazz, etc.. / Singing / Formal Training / Special Skills. Write on back if needed. Attach resume if needed

List any parts/roles you are interested in (or just write "any") _____

Will you take any role if you do not get the role you are interested in? _____

Note that if you are not a lead you will likely be playing multiple roles.

If you do not get a part, would you help in other areas? (lights, set, orchestra, stage crew, publicity, etc..)?

Please list the dates and types of conflicts you may have between now and final performance date. Rehearsals will be Friday evenings, Saturday mornings, Sunday afternoons (until tech week July 7,8,10 at which time we have additional evening rehearsals). OR – You can attach a calendar indicating dates you are unavailable.

Note that availability is an important component of who gets cast. Waiting until after the show is cast to disclose rehearsal conflicts may result in PCT retracting our offer of any part to you, whether lead, supporting or ensemble.

I hereby grant the Pickerington Community Theatre permission to use my likeness in photograph or video in any and all of its publications, including website entries, without payment or any other consideration.

I understand and agree that these materials will become the property of Pickerington Community Theatre and will not be returned. **I understand that, should I be chosen as a part of the cast, I must pay a \$30 participation fee to defray production costs (show license, building rent, etc...).** If you cannot afford this fee do not let it stop you from auditioning as we can make exceptions if you have a financial need. I understand Pickerington Community Theatre is a non-profit organization. I understand my email will be added to PCT's email list but will not be sold or provided to any other organization.

X

(Signature – parent must sign if you are under 18)

(Date)