

VERMILLION COMMUNITY THEATRE

Audition Sheet for "A Christmas Carol" 2024

Name: _____ circle preferred pronoun – *he/him, she/her, they/them, or prefer not to answer*

Parents Name (if under age 18): _____

Address: _____

Phone: (home) _____ (work) _____ (cell) _____

E-Mail address: _____

Height _____ Age (if under age 18) _____ Vocal Part (circle one): Soprano Alto Tenor Bass Non-Singer

Auditions are open to anyone who has completed kindergarten and older. Actors 6 and younger need to have a parent present at rehearsals.

Can you speak in a RP (high British) or Cockney accent? ____ Yes ____ No

Can you read music? _____ Any dance training? _____

Do you play guitar or any instrument? _____ If yes, how well? How many years? _____

What roles are you interested in? _____

List any other special skills you have: (juggling, stilt walking, tumbling) _____

List other shows that you have participated in.

WAIVER OF LIABILITY

The Vermillion Community Theatre, Inc. (VCT) is organized as a non-profit 501(c)3 corporation committed to promoting and providing community participation in all aspects of the theater. The Board of Directors and the production directors do everything they can to provide a safe and fun experience for everyone who participates in any aspect of the production.

The undersigned is voluntarily participating in the VCT production named above and hereby understands that VCT does not carry insurance of any kind. The undersigned further acknowledge that they have insurance that will cover them in the event an accident or injury should occur at any time during rehearsal or production of the play. Further, the undersigned agree that in no event will VCT be held liable should an accident or injury occur while participating in the production or while traveling to or from rehearsal or while engaged in promotion or other activities designed to advertise the production or to benefit VCT, Inc.

I understand that photographs taken during rehearsals and performances may be used wholly or in part in publications, artistic portfolios and for internet, editorial or advertising. I acknowledge that by signing this form, I give up all claims of ownership, income, editorial content and use of the photographs and assign all copyright ownership to Vermillion Community Theatre.

Signed:

PARTICIPANT SIGNATURE Date: _____

PARENT or LEGAL GUARDIAN (if participant is under 18 years of age) Date: _____ Phone: _____
(for emergency use)