



ACADEMY OF COMMUNITY THEATRE

Bringing Literature to Life

AUDITION APPLICATION

Name (As you would like it in the program): _____

Age: _____ Height: _____ Hair Color: _____

Gender: M or F (Circle)

Parents' Names (If Minor): _____

Best Phone: _____ Alternate Phone: _____

Parent Email Address: _____

Additional Parent Email Address (Optional): _____

Student Email (Optional): _____

Home Address: _____

Do you have a medical condition, disability, or special needs? Yes _____ No _____

If yes, please explain: _____

Acting or dance experience or training: _____

Are you currently enrolled in or previously taken classes with the Academy of Children's Theatre?

Yes _____ No _____

If yes, which classes? _____

Which role(s) would you like the most? _____

Will you accept any role offered to you? Yes _____ No _____

List any roles you would not accept: _____

IF auditioning for BOTH Acting & Dancing (Circle): Prefer Acting Role Prefer Dancing Role

IF you are not cast in an acting or dancing role, would you accept a sword fighting role?

Yes _____ No _____

Please list all conflicts to scheduled rehearsals and shows. _____

Are you currently cast in, or will be auditioning for, any other show at school or another theatre company between now and the end of this show: Yes _____ No _____

If so, which school or company: _____

What are the dates for that show (rehearsals through closing show): _____

List anything else that you would like us to know: _____

ACT II is a faith-based, non profit theatre company with a Christian worldview. Our mission is to serve the young actor, the local schools, and the community with wholesome, educational, high-quality theatre. All decisions, activities, and guidelines are aligned with Judeo-Christian beliefs, morals, and values. If I am cast, I agree to respect and abide by the direction of ACT II while participating in this production, including behavior, modest dress, wholesome language and appropriate conversations, casting decisions, costuming, and use of facilities.

Actor's Initials _____ Parent's Initials _____

If I am cast in the play, I will commit to being at all rehearsals and performances that I am scheduled to attend unless specified above. I understand that two unexcused absences may result in being removed from the cast. I understand that I will need to miss three days of school or work (November 10-12, 2021) to rehearse or perform during the day for local schools.

Actor's Initials _____ Parent's Initials _____

I have read all the information on the audition forms and the ACT II website and have answered each question honestly and thoroughly. I understand the scope of the commitment if I am cast, and will abide by the rules and guidance of ACT II.

Actor's Signature: _____

Date: _____

Parent's Signature: _____

Date: _____