

# DLO Musical Theatre — Footloose Audition Form

**PLEASE PRINT CLEARLY!**

Form # \_\_\_\_\_

NAME: \_\_\_\_\_ SCHOOL YEAR COMPLETED: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PREFERRED PHONE: \_\_\_\_\_ SECONDARY PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Names of Parent(s)/Guardians(s): \_\_\_\_\_

Parent Phone Number & Email: \_\_\_\_\_

For **which role(s)** do you wish to audition? \_\_\_\_\_

*Would you prefer to be considered for ensemble only (NOT a speaking role)?*      Yes    No

*If not cast in one of the roles you named above, would you accept another part?*      Yes    No

*If not cast in one of the roles above, would you accept an understudy part?*      Yes    No

If cast, are you willing to make appearances at public events in addition to the performances, in the event that we have them?    Yes    No

If cast, you will be required to have a naturally-occurring hair color, whether natural, dyed or a wig that you will provide. Please initial to acknowledge that you understand this expectation. \_\_\_\_\_

We will communicate with the cast via private Facebook group. Are you willing to receive communication via Facebook?    Yes    No

Please initial to acknowledge there will be no videotaping of the show. \_\_\_\_\_

**Musical Theatre Experience:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Dance Experience:**  
\_\_\_\_\_  
\_\_\_\_\_

Do you play a **musical instrument**?    Yes    No   If yes, what \_\_\_\_\_

**Vocal Range:**  
(Can be completed by music director):

**IMPORTANT**

**REHEARSAL SCHEDULE CONFLICTS:** Rehearsals will be Sundays, Mondays, & Wednesdays 6:00–9:00 p.m. During tech week (the week before opening night), there will be mandatory rehearsal every night. ***Performers are expected to be at every scheduled rehearsal/event unless arrangements have been made with the director.*** Failure to commit to rehearsals may result in dismissal from the show. **Please list all dates between now and August 6, 2017, when you will be unavailable.**

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ALL cast members are expected to assist *and* have at least one parent/adult assist on the Saturday, July 29, move-in date and the strike following the last performance on Sunday, August 6.

Initial: \_\_\_\_\_

Name of Parent/Adult you expect to assist: \_\_\_\_\_

**EVERY** cast member must pay \$35 for a youth musical membership. In addition, cast members with speaking parts must pay \$20 as a fully refundable deposit for scripts, which we are required to return. \$25 will be collected at the first parent committee/cast meeting, which will be held Monday, May 22nd. The remainder will be due in two weeks (June 5th). This membership includes the following: 2 tickets to the show, a T-shirt for the cast member, and music. Please initial to acknowledge: \_\_\_\_\_

**TEENS BEHIND THE SCENES:** Please check any and all of the following areas in which you would be interested.

Costumes  Set  Lights  Sound  Stage Crew  Props  Makeup

Please list any applicable experience in these areas:

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**LEADERSHIP TEAM:** A small group of cast/crew members will be selected to help with special projects/support. Would you like to be considered for the Leadership Team?  Yes  No

**T-SHIRT SIZE:** (Circle one): Adult or Youth (Circle one): S M L XL XXL XXXL