Show:	SALTWATER PERFORMING ARTS	
Desired Role(s):	Audition Date:	
Check here if you would not accept another role >	Check here if you would accept an understudy role >	
GENERAL INFORMATION		
Auditioners Name:	Age:	Preferred Pronoun:
Address:	City:	State: Zip:
Phone Number:	Email:	
Parent (if <18) or Emergency Contact Name	e:	
Parent/Emergency Phone & Email:		
	Grade/Position:	
Extracurricular/Civic Activities:		
EXP	ERIENCE	
List all dance, music, drama, and/or technic	cal studies:	
Performance Experience (list productions i	role, company	/theatre, year of performance:
Theatre tech experience (list production ro	le, company/	theatre, year of performance):
SCHEDUL	ING CONFL	ICTS
Final rehearsal schedule to be announced. Please list dates/ days of ALL POTENTIAL CONFLICTS (between now the show) and any show dates for which you are not available.  Unexcused absences (those not listed here or approved in advance) are grounds for dismissal.		
OT	HER INFO	
		f the following duties?
If for any reason you are not cast, would you be int Stage Crew Lighting Costumes Props Ushering Tickets	Sound	Set Construction Set Painting
Anything else we should know about you?		