

## **Oliver! Audition Form**

Full Name		
Date of Birth		
Telephone Number		
Email Address		
Emergency Contact Phone Number		
Emergency Contact Email Address		
Are there any medical condition we need to be aware of?		
What role or roles are your auditioning for?		
,		
Are you open to being cast in a different role than		
the one that you are auditioning for?	Yes	No
If you are unsuccessful in the role you are		
auditioning for, are you happy to be in ensemble?	Yes	No
If not cast, would you be happy to be part of the backstage crew?	Yes	No
Do you have any stage/music/performance experience? If yes, please list.		
Do you have any special talents/skills for example acrobatics?		
Part of being in the Show will require you to be a Member of Theatre Whakatane. Are you a current member?	Yes No	
You will be required to sign that you have read and understood the Theatre Whakatane     Etiquette and Standards of Behaviour.		
<ul> <li>As part of the advertising, we may wish to use some photos taken during rehearsals, is there a reason that you do NOT wish to be photographed, please inform the Production Manager, Bronwen Foxx.</li> </ul>		
<ul> <li>Please look carefully at the Rehearsal Schedule. Are there any dates on the rehearsal schedule that you absolutely cannot attend? Please inform the Production Manager, Olivia Mexted or one of the Audition Panel.</li> </ul>		
I confirm that I have read and understood the above requirements.		
Signature	 Date	