

**THE BELFRY THEATRE
AUDITION APPLICATION**



Today's Date: _____

Name: _____

Phone: _____ Email Address: _____

Are you on Facebook: Yes No If Yes, under what name: _____

Address: _____ City & Zip: _____

Emergency Contact: _____ Phone: _____

Stage Age: _____ Height: _____ ft. _____ in. Gender: _____

Preferred role in this show: _____

I will accept (check one): Any role Only preferred role

I'm willing to style my hair to fit the role: Yes No

Please list previous theatrical experience (or submit resume):

Please check the show calendar and list any schedule conflicts which will hinder the rehearsals/performances:

AGREEMENT:

If selected to participate in this production, I agree to follow all Belfry rules and guidelines. I agree to attend all rehearsals and performances on time and to participate in other aspects of the production as needed. I understand that failure to comply with these guidelines may result in my replacement. With my signature below (or that of a parent/guardian for youth under 18 years of age) I hereby authorize the Hamilton County Theatre Guild/ the Belfry Theatre to use my picture (or that of my child) for advertising purposes.

SIGNATURE (performer or parent/guardian): _____