

# Fourth St. Theatre

## *A Tuttle Christmas Carol*

Name: \_\_\_\_\_

Parents Names (if minor): \_\_\_\_\_

Address: \_\_\_\_\_

Email address: \_\_\_\_\_

Parents' email address (if minor): \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_ (Other): \_\_\_\_\_

Age: \_\_\_\_\_ Gender (Circle one): M / F Height: \_\_\_\_\_

Are you auditioning for a specific role? Y / N If yes, which role? \_\_\_\_\_

If you are not cast for this specific role, will you accept another role? Y / N

There are times that we need to cast a male in a female role, or a female in a male role.

Are you willing to be cast as the opposite gender? Y / N

If you are not cast as an actor are you interested in working backstage as part of the crew? Y / N

If yes, in what capacity? \_\_\_\_\_

Do you have any skin allergies which would be an issue with theatrical makeup? Y / N

If yes, please explain \_\_\_\_\_

Do you have any physical or mental conditions which could interfere with any role? Y / N

Vocal Range (circle): Soprano Alto Tenor Bass Not Sure

Past Music/Dance experience: \_\_\_\_\_

Sizes: Shirt \_\_\_\_\_ Pants \_\_\_\_\_ Dress \_\_\_\_\_ Shoe \_\_\_\_\_

How did you hear about Fourth St. Theatre? \_\_\_\_\_

Emergency Contact and Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

Due to our casting a large number of children in this production we are strongly encouraging parent volunteers. We cannot pull this off without you. Parent, please write in your name and mark which area you can volunteer. Please feel free to mark more than one area.

Name: \_\_\_\_\_ Email address: \_\_\_\_\_ Phone #: \_\_\_\_\_

I can help with (check one or more)

- \_\_\_\_\_ Costumes
- \_\_\_\_\_ Sets
- \_\_\_\_\_ Publicity
- \_\_\_\_\_ Program ad sales
- \_\_\_\_\_ Concessions (not every performance)
- \_\_\_\_\_ Help at rehearsals and backstage (not every performance)

---

Disclaimer: I will not hold the instructors, contractors, sponsors or hosts of Fourth St Theater or the Oklahoma Children's Acting Guild responsible for any injury which any participant might incur while in the program. I grant full permission for use of the participants' name, voice, and/or image in any related media or other promotional materials for any purpose without compensation. The Fourth St. Theater staff reserve the right to refuse service for disruptive behavior. I understand and agree that my non-compliance with any facility policies may result in refusal of service.

I further understand and agree that I am responsible for any damage to Fourth St Theater property, including but not limited to costumes, shoes, props, sets, or building, that is the direct result of negligent or purposeful actions by myself or my child.

REQUIRED – Responsible Adult SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_