AUDITION REGISTRATION FORM FOR SURREY YOUTH THEATRE COMPANY (SYTCO) 2020/2021 23rd Season

Name:		Age:	Grade:	School:
Parents:		/		
Phone :	Email:			
Address:			PC:	
Interests and Activities:				
Serious:				
Casual:				
How did you hear about	Sytco?			
Shows you have seen: _				
Teacher Name/contact i	nfo:			
Coach or other:				
credit will be given. I realize she attends every rehearsal of NOT tolerated unless cleared be cast in every play this sea Company members will be function without parent invosmoothly, I will be willing to Set Build or Paint Costume create a Promotions: Parent Coordinate	eks after the first rehears: e that if my child is chose or will notify the Director d in advance with the Dir ason, but will be involved cast in the main stage spr olvement, and that every o help on one or more of t: Transpe and/or find: Social Media tor/Production Chair:	al and it will be pren for the Company in case of illness rector and Stage Mal in each one and dring production. Reparent must help in the following conceptation of Set/Props:	o-rated. After the sy, I will be response. Absences from Manager. I understontinue with the ealizing that a S'n some aspect formittees: Load in/out: Publicing the system of the syste	nis time, no refund or tuition consible for making sure he/ rehearsal or performance are stand that my child will not be weekly schedule. All YTCO production cannot for the program to run
PARENT'S SIGNATURE		PLEA	SE PRINT	

SEND COMPLETED FORM TO: SYTCO20@GMAIL.COM