AUDITION REGISTRATION FORM FOR SURREY YOUTH THEATRE COMPANY (SYTCO) 2021/2022 24th Season

Name:	Age:	Grade:	School:
Parents:	/		
Phone :			
Address:			
Interests and Activities:			
Serious:			
Casual:			
How did you hear about Sytco			
Shows you have seen			
Teacher Name/contactinfo:			
Coach or other:			
Why do you want to be in Sytco and words)			in from it? (In 50 to 80

PARENT INFORMATION

I understand that once my child has been accepted, there is a non-refundable deposit of \$75.00. There is a tuition refund grace period of 3 weeks after the first rehearsal and it will be pro-rated. After this time, no refund or tuition credit will be given. I realize that if my child is chosen for the Company, I will be responsible for making sure he/ she attends every rehearsal or will notify the Director in case of illness. Absences from rehearsal or performance are NOT tolerated unless cleared in advance with the Director and Stage Manager. I understand that my child may not be cast in every play this season, but will be involved in an appropriate one for his/her age and ability, and will continue with the weekly schedule. All Company members will be cast in the main stage spring production.

Realizing that a SYTCO production cannot function without parent involvement, and that every parent must help in some aspect for the program to run smoothly, I will be willing to help on one or more of the following committees:

Set Build or Paint:	Transportation of S	Set/Load in/out :	
Costume create and/or Fin	d: Props	:	
Promotions:	Social Media/Web: _	Publicity:	_
Parent Coord./Production (Chair:	Backstage Supervision:	
Photography/Memory Boo	k:House Mana	ger (parties, concession, deco's)	

PARENT'S SIGNATURE ______ PRINT_____