



2019 - 2020 PERFORMANCES

HELLO! WE'RE THRILLED you're interested in auditioning for Disney's *Frozen Jr.* and/or *Annie*!

Auditions are Tuesday, July 9 or Thursday, July 11 from 6pm – 10 pm. Please go to our Audition Sign Up (<https://tinyurl.com/y2kyfpoz>) and select which date/time you would like.

Early auditions are June 25 at 6 pm. Please contact me for an early audition spot.

If you are not available either of those dates, send me an email: christy@midwaytheatercompany.org

Specific audition information (including vocal selections) will be sent upon receipt of your audition form and registration.

All auditions and rehearsals will be held at Grace Bible Church, 1000 S. Canal Road, Lansing, 48917

Make sure you check out our rehearsal calendar on the audition form. Putting on a show is a group effort and we need all cast members to commit to attend rehearsal. On your audition form, let us know what rehearsals you will miss; that information will be considered during casting. Missing dates other than the ones you are preapproved to miss could result in dismissal from the cast. We would hate for that to happen, so please, check the calendar carefully!

Feel free to contact me with any audition or show questions. We are looking forward to another great season!

CHRISTY DUFFY

Producer

Midway Theater Company

midwaytheatercompany@gmail.com

www.midwaytheatercompany.org

517.316.5272



OCTOBER 17-19, 2019

Disney's *Frozen Jr.* is designed as educational theater. Actors will have an awesome opportunity to learn the ins and outs of stagecraft – from basic terminology to choreography to an introduction to singing in parts. This will be a fully costumed show with props and sets! You must be between 8 and 18 years old by August 6. If cast, the cost is \$200 per actor. Actors may sell ads to cover their costs.



FEBRUARY 27-28, 2020

Annie will be cast from those 10 years old and older. If you will be 10 by October 22, you may audition for *Annie*. There is no cost to actors cast in *Annie*.



2019-2020 AUDITION FORM

DISNEY'S FROZEN JR. & ANNIE

Office Use Only

Name: _____ Age: _____ Height: ___ ft. ___ in.

School/Work: _____ Email: _____

Phone 1: _____ Phone 2: _____

Show Auditioning For: *Disney's Frozen Jr.* *Annie*
 Disney's Frozen Jr. & Annie - Please rank first choice: _____

List All Conflicts You Have With Rehearsals, Show Week Or Show Days

Please list even potential conflicts. These will be your only approved absences. Keep in mind, absences will be considered during casting. Rehearsal dates are below and at www.midwaytheatercompany.org. You may not be called for the full rehearsal time, but you must be available if called.

Disney's Frozen Jr. (all times Tuesdays 5:30-8:30 unless noted)

Rehearsals at Grace Bible Church

August 6, 13, 20, 27 _____

September 3, 10, 17, 24 _____

October 1 _____

Show Week:

Wednesday, October 9

5:30 pm – 8:30 pm _____

Thursday, October 10

5:30 pm – 10 pm _____

Monday, October 14

5:30 pm – 9 pm _____

Tuesday, October 15

5:30 pm – 9 pm _____

Final Dress Rehearsal:

Wednesday, October 16

5:30 pm – 9:00 pm _____

Performances:

Thursday, October 17 – Opening Night

5:30 pm – 9 pm _____

Friday, October 18 – Show Day

5:30 pm – 9 pm _____

Saturday, October 19 – Show Day

12:30 pm – 9 pm _____

Annie (all times Tuesdays 5:30-9:30 unless noted)

Rehearsals at Grace Bible Church

October 22, 29 _____

November 5, 12, 19, 26 _____

December 3, 10, 17 _____

January 7, 14, 21, 28 _____

February 4, 11, 18 _____

Show Week:

Wednesday, February 19

5 – 10 pm _____

Thursday, February 20

5 – 10 pm _____

Monday, February 24

5:00 pm – 10 pm _____

Tuesday, February 25

5:00 pm – 10 pm _____

Final Dress Rehearsal:

Wednesday, February 26

5:00 pm – 10:00 pm _____

Performances:

Thursday, February 27 – Opening Night

5:00 pm – 10 pm _____

Friday, February 28

5:00 pm – 10 pm _____

Saturday, February 29

12:00 pm – 11 pm _____



2019-2020 AUDITION FORM

DISNEY'S FROZEN JR. & ANNIE

Previous Performance Experience: _____

Special talents? (gymnastics, juggling, instrument, magic): _____

Specific role(s) auditioning for?: _____

Are you willing to accept any role? Yes No

Are you willing to alter your hair (cut/color) for a role? Yes No

Can you read music? Yes No

Would a parent, guardian or sibling be interested in volunteering for any of the following?

(Please check all that apply)

Set Construction

Hair/Makeup

Concessions

Painting

Ad Sales

Ushering

Costumes

Performance Shoes and Socks/Tights/Hose

All actors are responsible for their own performance shoes and foot coverings. These could be either jazz shoes, character shoes or dress shoes and socks/tights/hose. The director will tell you at the first rehearsal what type of shoe your character will wear.

Additional Information: _____

MIDWAY THEATER COMPANY MINOR CONSENT FORM

Midway Theater Company is committed to producing quality theater in an encouraging atmosphere. MTC was formed by Christians who are thankful to God for his good gift of the arts. We desire to encourage people of all walks of life to use their talents on stage, behind the scenes or in the orchestra.

A participant under the age of 18 must have parental consent to participate in Midway Theater Company productions. This form must be completed, signed, and turned in before the participant can audition.

Name of Child: _____ Date of Birth: _____

Name of Parent/Guardian(s): _____

Address: _____

Tel (day): _____ Mobile: _____

Email: _____

Does your child have any medical issues we should be made aware of (allergies, etc.)? _____

Does your child need to take medication for above medical issues while in rehearsals or performances or on an as needed basis (inhalers, epi pen, etc.)? _____

Emergency contact details: (please list additional contact other than above, if possible)

Name: _____ Tel: _____

Relationship to Child: _____

Midway Theater Company assumes that your child knows which individuals are approved to drop them off and pick them up from rehearsal and other Midway events. If you have a concern, please set prior transportation arrangements with the production staff.

CONSENT (please read carefully)

1. I agree to allow my child to participate in Midway Theater Company.
2. I agree to allow Midway Theater Company to contact the closest medical official in the event of an emergency. I understand that this is in the best interest and safety of my child.
3. I understand that Midway Theater Company and its affiliates accept no responsibility for loss, damage or injury caused by or during attendance at any of the rehearsals/performances.
4. I agree to allow Midway to use my child's likeness and photographs for press release and media purposes.
5. For safety purposes, the student will adhere to all rules and regulations set forth by the production staff. Midway and its Board Members or affiliates will not be held liable for any form of injury (physical and emotional).

Parent/Guardian Signature _____ Date: _____

MIDWAY THEATER COMPANY ADULT CONSENT FORM

MTC is committed to producing quality theater in an encouraging atmosphere. MTC was formed by Christians who are thankful to God for his good gift of the arts. We desire to encourage people of all walks of life to use their talents on stage, behind the scenes or in the orchestra.

All participants must fill out this consent form.

Name: _____ Date of Birth: _____

Address: _____

Tel: _____ Mobile (if different): _____

Email: _____

Do you have any medical issues we should be made aware of (allergies, etc.)? _____

Emergency contact details: (please list additional contact, if possible)

Name: _____ Tel: _____

Relationship to Participant: _____

CONSENT (please read carefully)

1. I agree to participate in Midway Theater Company.
2. I agree to allow Midway Theater Company to contact the closest medical official in the event of an emergency. I understand that this is in the best interest and safety of myself.
3. I understand that Midway Theater Company and its affiliates accept no responsibility for loss, damage or injury caused by or during attendance at any of the rehearsals/performances.
4. I agree to allow MTC to use my likeness and photographs for press release and media purposes.
5. For safety purposes, I will adhere to all rules and regulations set forth by the production staff. MTC and its Board Members or affiliates will not be held liable for any form of injury (physical and/or emotional).

Signature _____ Date: _____