

Electric City Playhouse

*** = required information**

***Audition Form for** *(put name of show here):* _____

*Name: _____

*Street Address: _____

*City: _____ *State: _____ * Zip: _____

*Email: _____

**A) Please complete all possible phone numbers:*

Cell Phone: _____

Home Phone: _____

Work Phone: _____

**B) Circle/highlight the number which you prefer ECP use to contact you.*

Role(s) Desired: _____

*Will you accept ANY role offered? YES _____ NO _____

Experience: List highlights, or submit a résumé, covering your acting experience and training. Please include any special skills, especially stage combat, circus/athletic skills, etc.

*A) Would you work in another function on the show if you are not cast? YES _____ NO _____

B) If YES, in which areas are you interested? *(Please circle or highlight)*

Costumes	Set Decoration	Publicity
Hair/Make-up	Set Construction	Ushering
Lighting	Stage Crew	Wherever you need me – I'm flexible!
Properties	Sound	

*If you are an Equity actor: Do you understand that this is a non-paying, non-Equity show, and that you are responsible for obtaining all waivers and permissions necessary for your participation? YES _____ NO _____ NOT APPLICABLE _____

How did you learn about these auditions? _____

May we add you to our electronic patron mailing list? YES _____ NO _____

****Please read the Code of Conduct and then complete the signature conditions on the Audition Release/Signature Conditions.***

****Using the Conflict Calendar, note any dates in which you have conflicts.***