

AUDITION FORM

Cast Theatrical Company, Inc. (*CAST*) is a registered 501(3)(c), Non-Profit Community Theatre open to the general public. No dues are requested or required for participation. All participants (e.g.: volunteers, actors, assistants, managers, crew, etc.) are required to read and accept the *CAST* guidelines and rules. A hard copy of all *CAST* Rules and Guidelines are available upon request.

PLEASE PRINT:							
Name:	Address:						
Contact Phone #:	City:						
Email Address:	ZIP:						
List on page 2 your acting and/or theatre experience within the past three years (omit if resume attached).							
Please state any health issue that we need to be aware of, such as: diabetes, allergies, epilepsy, etc.							
Production Name:							
Are you available for all PerformanceDates? Yes No)						
If you are not selected as an actor, would you be intereste you like to help?	d in assisting with the production? If yes, how would						

Alcohol and Drug Use:

Within the CAST places of operation: auditoriums, workshops, offices, associated spaces and all storage facilities, the use of alcohol and recreational use of drugs are not permitted by:

- a) anyone involved in the production of a play (including but not limited to: Workers, Actors, Actresses, Stage Director, Assistant Director, Stage Manager, Props Manager, Concessions, Housekeeping Assistants and/or other Volunteers working at the theater), including during rehearsals and before and during performances, or:
- b) anyone during any set construction work; during set demolition, set finishing or any other set related activities.

Talent Release:

I authorize CAST to make use of my appearance in the aforementioned production as follows.

I understand that I am to receive no compensation for this appearance. CAST shall have complete ownership of the production. I give CAST the right to use my name, likeness and any other biographical material to publicize the program and the services of the company.

I understand that CAST, or their designee may:

- 1. photograph me and record my voice and likeness for the purposes of the production, whether by film, videotape, digital or any other means.
- 2. make copies of the photographs and recordings
- 3. use my name and likeness for the purposes of education, promotion or advertising of the production or for any other promotional purposes by *CAST*.

I further understand the master copies of all images remain the property of *CAST* in perpetuity and that there will be no restrictions on the number of times my name and likeness may be used

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Accidents and injuries:

CAST rehearsals are executed in a manner with safety of the individual in mind. At no time is a participant required to do anything that has the risk of injury. However, all and any participation by an individual in a cast production, rehearsal, sponsored activity or support activity is done so at the individual's own risk. Treatment of any injury that occurs during such participation is the legal responsibility of the individual.

CAST considers acknowledgement of these policies as a binding of agreement.

Acknowledgement: Sign in full:				Date:			
If under the ag	ge of 18, Sig	nature of Parent or	Legal Guardian:				
Please print na	ime and con	ntact phone number	·				
How did you h	near about a	auditioning at CAST	?				
Facebook?	Email?	Cast Website?	Instagram?	Friend?	Other ()	
List acting exp	erience with	nin the past three ye	ears (omit if resur	ne attached).			
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