



# Scarborough Theatre Guild

## Audition Application

Name: ☐ Mr. ☐ Mrs. ☐ Ms. \_\_\_\_\_ Phone # \_\_\_\_\_

E-mail: \_\_\_\_\_

Show auditioning for: \_\_\_\_\_ Audition date: \_\_\_\_\_

Preferred role(s) \_\_\_\_\_

Will accept any role suitable? ☐ Yes ☐ No

If not cast for this play, would you like to work on this production? ☐ Yes ☐ No (If yes, please elaborate on reverse)

How did you hear about STG's audition? ☐ Family/friends ☐ Newspaper ☐ STG newsletter or website ☐ Other newsletters

☐ Other sources (please specify) \_\_\_\_\_ ☐ Other websites (please specify) \_\_\_\_\_

Have you read this play? ☐ Yes ☐ No

Are you currently a STG member? ☐ Yes ☐ No

Please list other theatre groups you are a member of \_\_\_\_\_

Are you a member of Canadian Actors' Equity (CAEA)? ☐ Yes ☐ No Please initial to certify \_\_\_\_\_

Do you agree to follow standard health and safety precautions during production (e.g., masking, staying home if unwell, and keeping vaccinations up to date)? ☐ Yes ☐ No Please initial to certify \_\_\_\_\_

Are you at present, or will you be committed to any other production within the scheduled rehearsal and playing period?

☐ No ☐ Yes, please specify all dates \_\_\_\_\_

Do you have any other scheduling conflicts, during the rehearsal period (vacations, work shifts, show tickets etc.)?

☐ No ☐ Yes, please specify all known conflicts \_\_\_\_\_

### IF CAST IN THIS PRODUCTION, I UNDERSTAND AND AGREE THAT:

- The casting of roles is conditional on an auditionee (18 years of age or older) becoming a full member of Scarborough Theatre Guild, if not already a current member. Upon being accepted as a member of the cast, and at the first rehearsal, I must submit my membership dues to STG's Membership Secretary, the Producer, or the Stage Manager.
- I have listed all currently known dates that conflict with the standard STG rehearsal dates that were detailed in the audition notice
- I must be available from 7:00 to 11:00 p.m. on the weekdays; Sunday rehearsal (based on Director rehearsal schedule) prior to opening night;
- I **MUST** be available for all 10 performances specified on the Audition notice – curtain times are 8:00 p.m. for evening performances, and 2:00 p.m. for matinees. Shows are performed at the Scarborough Village Theatre, located at 3600 Kingston Road (at Markham Road). Call times are usually at least 1 hour before curtain.
- I am required to assist in the move-in and move-out of the theatre. If there is a conflict, this must be stated up front, and it is the Producer's discretion to assign me to other duties.
- **I must be available during "Hell/Tech" week (Sunday to Thursday before opening night).**
- Extra rehearsals may be required, especially 3 weeks prior to opening night. Once a final rehearsal schedule is available, I will advise the Director and Stage Manager of any remaining scheduling conflicts
- **I agree to the above-mentioned conditions and acknowledge that if unforeseen or extenuating circumstances prevents me from meeting my obligations during critical phases like hell/tech week or actual performances, the Director and or Producer reserves the right to replace me for the duration of the run.**

Signature of Applicant \_\_\_\_\_

*Please see reverse for additional questions.*

Called back for roles:

Comments:

**Previous Theatrical Experience (most recent first)** Only needed when no resume is available?

Name of Show	Role/Position	Theatre Group	Year

**Special Talents / Abilities:**

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**Theatrical Training:**

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**Please check your area(s) of interest or talent:**

- ☐ Actor ☐ Producer ☐ Assistant to Producer ☐ Director ☐ Assistant to Director ☐ Stage Manager ☐ Assistant Stage Manager
- ☐ Running Crew ☐ Costume Design ☐ Wardrobe / Sewing ☐ Dresser ☐ Hair Design ☐ Make-up Design ☐ Set Design
- ☐ Master Carpenter ☐ Set Construction ☐ Set Painting ☐ Set Decorating ☐ Props Coordinator ☐ Lighting Design
- ☐ Lighting Hang Crew ☐ Lighting Operator ☐ Sound Design ☐ Sound Operator ☐ Publicity/Promotions ☐ Poster/Program Design
- ☐ Front-of-House ☐ Refreshments ☐ 50/50 ☐ Photography ☐ Newsletter Editor ☐ Play-Reading Committee [ ] Catering
- ☐ Board/Exec.Member ☐ Other: \_\_\_\_\_

**The information you provided above is for the following purposes:**

- Allowing STG to maintain a list of its current and past members.
- Allowing STG to distribute periodic documents such as the monthly newsletters, audition notices, staff hiring/help wanted notices and notices of the Annual General Meeting, and any special general meetings.
- Allowing the Guild to maintain a database of potential resources to help out in the many different facets of mounting a show, or of managing the STG itself.

Your information is stored by Scarborough Theatre Guild, and may be released to producers of STG shows, but is not released to any other third party, or to the membership at large. By signing this membership form, you consent to the collection of your personal information as given for the purposes defined.

I hereby consent to the collection of the above information for the purposes stated.

Signature of Applicant \_\_\_\_\_

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Scarborough Theatre Guild – 2105 Midland Avenue, Scarborough, Ontario M1P 3E3, Canada