



NAME _____ GENDER _____

ADDRESS: _____ BEST PHONE: _____

CITY/STATE/ ZIP: _____ SECOND BEST PHONE: _____

EMAIL: (this is how we contact you during rehearsal period): _____

EXPERIENCE: (Please list any singing, theatrical or dance experience such as “voice or dance lessons for 5 years.” If you have been cast with us in the past year, you should only include experience received AFTER the last performance.) You may use the back of this page for anything additional. You may attach a resume instead.

ARE YOU AUDITIONING FOR A SPECIFIC ROLE AND IF YES, WHAT? _____

IF YOU ARE NOT CAST IN THIS ROLE, WILL YOU ACCEPT AN ENSEMBLE ROLE? ____ YES ____ NO

WHAT SONG WILL YOU SING DURING YOUR AUDITION? _____

CONFLICTS ARE VERY IMPORTANT IN CASTING. PLEASE READ THE CONFLICT POLICY AND PERFORMER CONTRACT AND RETURN IT TO US SIGNED WITH THIS FORM.

Rehearsals will be held Fridays from 6:30-9:00 pm and Saturdays 10:00 am-12:00 pm.

Performances: April 23rd | School Shows During the day: April 23rd and April 24th 2024.

Please bring personal calendars and be prepared to list all conflicts (Fridays & Saturdays) beginning with Friday March 8th, 2024 – April 20th, 2024. Please do not assume that we know when any general holidays are (ie., school breaks, etc) and plan to list those as conflicts if you will be out of town or otherwise engaged. Conflicts must be noted at the audition and will influence casting. Only conflicts noted at the audition will be taken into consideration.

NO CONFLICTS ALLOWED ON:

April 19th, 20th, 22nd, 23rd and 24th.

LIST YOUR MANDATORY CONFLICTS HERE or WRITE NONE if you have no conflicts.

Please sign below that you have read and understand the above conflict and rehearsal information.

Signature: _____

** Parent/Guardian Signature for Under 18: _____

The Augusta Players thanks you for auditioning. We are a non-profit community theatre and depend on our volunteers. Please check any areas of interest if you or a family member would be interested in joining our group as a volunteer whether or not you are cast.

VOLUNTEER JOBS (Please check all that you would be interested in)

- | | | | |
|---------------------------------|---------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Props | <input type="checkbox"/> Set Building | <input type="checkbox"/> Costumes (sewing) | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Makeup | <input type="checkbox"/> Box Office | <input type="checkbox"/> Set Crew | <input type="checkbox"/> Load in/out |

If you have experience in any of these roles, please give a brief description:

_____ **FOR PRODUCTION USE ONLY**

MUSICAL DIRECTOR'S COMMENTS

Range:

Voice:

Lead?

Chorus?

DIRECTOR'S COMMENTS

CHOREOGRAPHER COMMENTS

The Augusta Players Performer Contract: 2023-2024

The Augusta Players is an award-winning community of volunteers and professionals who produce the highest-quality theatrical productions as a part of our mission. It is only through the professionalism and dedication of our volunteers that we are successful. Thank you for being a valued part of our organization!

Schedule Conflicts

To ensure a professional production and to serve our ticket-buying audiences, we ask you make this rehearsal and performances a priority. Production timelines are usually a 6-7 week commitment. Because of the fast production time, it is very difficult to work on items missed because of absences. Therefore, The Augusta Players asks you to adhere to the following policy for conflicts:

1. Conflicts should be limited to school or work activities. Other types of conflicts and/or excessive conflicts will require director approval prior to final casting.
2. No conflicts will be allowed the two weeks prior to show opening. Zero conflicts will be allowed during the performances of the show.
3. Misusing the conflict requirements may result in a) dismissal from the show, b) removal from scenes, c) replacement in scenes. These results are at the discretion of the director.

_____ Initial

Media

To promote The Augusta Players, performances, and programs, we ask allowance to record, photograph, and/or video you for use in various media formats. Please initial below to show your approval of this statement: I grant The Augusta Players permission to use my likeness and voice in all visual and audio mediums in any and media and promotions. This may include but is not limited to the website, program, promotional materials, commercials, billboards, and social media. I understand my likeness will be used and I will not receive payment or any other consideration.

_____ Initial

Waiver of Liability

I release and hold harmless The Augusta Players from any and all claims, costs, suits, actions, judgments or expenses upon any damage, loss or injury to me or to my property which may arise from this volunteer commitment. I acknowledge that I am fully aware of any and all risks posed.

_____ Initial

In signing below and initially above, I acknowledge that I have read, understood, and agree to the Schedule Conflicts and Media policies and the Waiver of Liability.

Name: _____

Date: _____

Signature: _____

Parent or Legal Guardian Signature if volunteer is under the age of 18: _____

(Parent or Legal Guardian should be the one to initial above if volunteer is under the age of 18.)