Lewiston Civic Theatre Audition Form

Show: **Happy Anniversary Angel, Love Gino** Number _____ Date _____

Note: There will be additional time **required** above and beyond the rehearsal times, such as the shows production, set construction, painting, costuming and etc. *You're required additional contribution to this production will be about **8 hours.***
If you are considering changes to your appearance or hair, these changes need to be approved by the Director and Costumer. _____ **Initials**

Name: _____

Pronouns: ☐He/him ☐ She/her ☐They/them   **Height**: _____   **Age**: _____

Address: _____

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

Phone Numbers: (Check the number that is best to reach you with)

☐**Home**: _____   ☐**Cell**: _____   ☐**Work**: _____

E-Mail: _____   Do you have a **Facebook Account**?: ☐ Yes ☐ No

Role(s) you would like to read for:

Role(s) you will not accept:

Please note any special skills, *(i.e. singing, dance, juggle, etc.)*

If not cast, would you be willing to work on set construction, painting, backstage crew, lighting, costuming, etc? ☐ YES   ☐NO

Sign: _____ (Parent or Guardian, if not 18 years old)

FOR LEWISTON CIVIC THEATRE USE ONLY – PLEASE DO NOT WRITE IN THE SPACE

Reading _____ Notes:_____

Vocal   _____   _____

Dance   _____   _____

Yes   _____   _____

No   _____   _____

Please **Turn Page** to Complete Form →

Rehearsals will be Monday through Friday, at the LCT Box Office, 832 Main St, Lewiston & Lindsay Creek Vineyard. You are required to attend all rehearsals of scenes and numbers that you are in. Most rehearsals will take place during the week between 6- 9 pm. The closer to the show time, rehearsals will increase in frequency and your time commitment is important.

Performance Dates: January 17 – 26th at the Lindsay Creek Vineyard

We ask that you **<u>do not</u>** disclose your casting status until after LCT has made an official post. This is to ensure everyone who has auditioned has had ample time to be notified and have accepted their role.

Theatre Experience: ☐See attached resume

Please List any scheduling **conflicts** you may have with rehearsal or the show (Please list all known dates)

Do you have any **allergies** or **medical issues** that would be helpful for the director and staff to know about?
☐ Yes ☐ No (If yes, please list below – If you'd rather discuss during your audition please check here ☐)