



Date: _____

Preferred Name: _____ Pronouns: _____

Email Address: _____ Phone: _____

Age: _____ Parent Name: _____

Parent Email: _____ Parent Phone: _____

Please list any characters you would like to be considered for: _____

Please list any characters you would NOT like to be considered for: _____

If you are NOT cast in the show, would you be interested in crew? _____

If you are NOT cast in the show, would you be interested in being an understudy? _____

Please list recent performance experience (This may include classes, camps, school, church, and other organizations)

PRODUCTION	ROLE	ORGANIZATION

Dance Experience: _____

Director/Staff Notes:

our 95th season

 see yourself here



Rehearsals are typically Mon-Thurs evenings 6:30-8:30 pm (exact start/end times to be determined once all cast conflicts have been considered). If you have scheduling conflicts, please circle ALL conflict dates. Provide a brief explanation of conflict(s) if possible.

November

S	M	T	W	T	F	S
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

December

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

*Denotes tech rehearsals and performances that attendance is **required**.

January

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11*	12*	13*	14*	15	16
17*	18*	19*	20*	21*	22*	23*

If no conflicts, initial here: _____