

**NEWPORT CHILDREN'S THEATRE
AUDITION FORM**

SHOW: _____ DATES: _____
NAME: _____ AGE: _____
PARENT NAME(S): _____
STREET, TOWN, ZIP: _____
PHONE: _____
SCHOOL: _____ GRADE: _____
E-MAIL: _____

I AM INTERESTED IN:

- ____ ONSTAGE
____ BACKSTAGE
____ DOESN'T MATTER

REHEARSAL SCHEDULE AND CONFLICTS

Cast members must be available for ALL performances and ALL production week rehearsals. In addition, cast members must attend ALL rehearsals they are scheduled for, unless previous arrangements have been made with the director.

PLEASE LOOK AT THE SAMPLE REHEARSAL SCHEDULES as you complete this part of the form.

LIST ANY PERIOD OF TIME YOU ARE UNAVAILABLE BELOW (includes regular activities, i.e. scouts, church, classes, family vacations, etc.):