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| --- | --- |
| NAME:AGE: |  |
| CONTACT NUMBER: |  |
| EMAIL: |  |
|  |  |
| Part/s that you would like to be considered for: |  |
| Audition piece (Play, Character, scene): |  |
| Please briefly outline any relevant acting/performance experience: |  |
| Any skills (eg puppetry, sign language, unicycling – etc): |  |
| Please tick your availability, as best as you can say right now, for January – March 2022: | Monday from 5.30pmTuesday from 5.30pmWednesday from 5.30pmThursday from 5.30pmFriday from 5.30pmSaturday from 11 – 3pmSaturday from 5.30 – 8pmSunday 11 – 3pmSunday 5.30 – 8pm22-26th of march (production dates) |
| Do you consent to the director keeping this document on file until the end of the production on the 26th of March and then destroying it? |  |

Thank you for coming to audition. Please fill in this form and bring it into the audition.