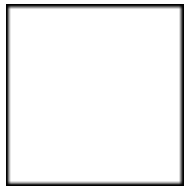


MAMMA MIA! AUDITION FORM



Please take the time to complete all details **CLEARLY**

Name: _____ Date Of Birth: ____/____/____ Age: _____

Address: _____ Suburb: _____ Post Code: _____

Mobile: _____ Email Address: _____

How did you find out about 'WMTC Inc' Auditions? _____

(please tick one or more of the following)

- Please consider me for the following **onstage** role/s (specify) _____
- If unsuccessful in obtaining the above role/s, I would accept an **alternative onstage** role/s
- If unsuccessful in obtaining any lead/supporting roles, I would accept an **ensemble** role
- I am happy to be considered for **ensemble** role ONLY
- If I am unsuccessful in obtaining a role in this production, I would be willing to assist with backstage/FOH/lighting etc

PREVIOUS THEATRE EXPERIENCE
(please complete the following or attach a resume)

Year	Show	Role	Company

VOCAL:

On a scale of 1-10 (10-Very Good, 1-Not at all)...

Type / Range (if known): _____ How well do you read music? _____

Trained With: _____ Yrs How well do you hold harmonies? _____

DANCE:

OTHER: (please list additional dance styles studied)

Years of training: Ballet: _____ yrs Jazz: _____ yrs _____

Tap: _____ yrs Acrobatics: _____ yrs _____

Additional Skills (eg. Musical Instrument / Acrobatics): _____

Please list any past/current injuries or restrictions that may affect your ability to rehearse / perform:

PLEASE CIRCLE YES OR NO FOR THE FOLLOWING QUESTIONS

Are you willing to cut/grow your hair? **Yes / No**
 Are you willing to shave/grow facial hair? (*male only*) **Yes / No**
 Are you willing to colour your hair? **Yes / No**
 Are you available Monday and Wednesday evenings from 7:00pm
 and Sundays from 10.00am, commencing Sunday 2 February, 2020? **Yes / No**

Are you currently involved in, or planning to audition for another show during December 2019 to May 2020? **Yes / No**

If yes, please indicate involvement: _____

Are you available for:

- | | |
|--|-----------------|
| 1. First official rehearsal on Sunday 2 February from 1.00pm? | Yes / No |
| 2. Rehearsal weekend on Saturday 29 February and Sunday 1 March? | Yes / No |
| 3. Rehearsal weekend on Saturday 4 and Sunday 5 April? | Yes / No |
| 4. Bump In/ Technical Week: Friday 24 to Tuesday 28 April? | Yes / No |
| 5. Dress Rehearsal/ Preview Night: Wednesday 29 and Thursday 30 April? | Yes / No |
| 6. Performance Dates: Friday 1 to Saturday 16 May? | Yes / No |
| 7. Bump-Out: Evening of Saturday 16 May? | Yes / No |

Please list ALL dates of any commitments/holidays/unavailabilities (and their reasons) that you have during the rehearsal period: (*note that successful auditionees will be required to have a minimum of 90% attendance to all rehearsals, unless otherwise agreed with the Production Team*)

If successful in my audition I agree;

- To become a financial member of Williamstown Musical Theatre Company Inc., and will pay the applicable fees. Payment plans can be discussed with the Treasurer.
- I have committed to attend all rehearsals and production dates required of me and understand that my absence from these could necessitate my replacement and withdrawal from the show, unless previously discussed with and approved by the Williamstown Musical Theatre’s Committee and the Director of the production.
- I will be required to assist with set construction and set painting, costumes and props.
- That I may be required for publicity and promotional purposes.
- To sell a minimum of 20 tickets.

FEES

Membership -	\$25
Show Fee -	\$125
TOTAL	\$150

**All cast will be required to supply their own make-up, hosiery and shoes for the show (*at their own expense*)
 **Note the show fee includes a production photo cd given to all cast members at the end of the season.

Williamstown Musical Theatre Company Inc (WMTC), in the course of its business, collects certain information relating to members and auditionees. WMTC guarantees that it will:

1. Keep confidential and ensure that its committee and/or agents keep confidential, the data collected and take all steps as may be necessary to safeguard the confidentiality of the data;
2. Not disclose the data to any person unless disclosure is necessary for the provision of the services provided by WMTC; or has been requested and authorized by the member/ auditionee; or is required by law;

I agree to abide by all the above-mentioned conditions and the Constitution and Company Policies of Williamstown Musical Theatre Company Inc.

Signed: _____ Date: ___/___/___

(Parent or Guardian to sign if auditionee is under 18)