



PLEASE ATTACH A RECENT PHOTO OF YOURSELF TO THIS FORM



Audition Registration Form

Role you are auditioning for _____

Contact Details & Casting Statement

Title: Mr/Mrs/Miss/Ms _____

Name: _____

Address: _____

Email: _____

Phone No's: Home _____ Mobile _____

Date of Birth: _____ Height(cm): _____

Hair Colour: _____

Vocal Range: _____ Do you read Music?: Yes / No (Circle)

Prepared Audition Song/s: _____

- Are you willing to take an alternative role including Ensemble? Yes / No
- Would you be willing to be part of the Vocal Backing team? Yes / No
- Do you have any commitments that may conflict with the rehearsal/performance period between 18 August – 01 December 2019? (If Yes, complete details on Page 2) Yes / No
- If selected for Les Miserables, I approve my contact details being on the company list Yes / No
- If not successful in gaining an onstage role, would you like to help in another area? Yes / No
- If Yes, which areas might you be interested in? _____
- Can we add your email address and contact details to the AMT & Amici Trust databases? Yes / No

SHOW SEASON: 07 November – 01 December 2019, Civic Theatre, Auckland

Please state previous Theatre, Music or any relevant experience:

Please list any known prior commitments below:

Rehearsals are generally Monday to Thursday evenings, and Sunday afternoon/evenings. Commitments not listed and approved prior to the first rehearsal may result in re-casting.

PLEASE READ THE BELOW THOROUGHLY BEFORE SIGNING THE DECLARATION

This is a community theatre production and as such, your input is on a voluntary basis. The production is to be rehearsed and performed in complexes which are non-smoking.

If successful in my audition, I agree to:

- Become a financial member of Auckland Music Theatre Inc for the 2019 calendar year.
- Unless arranged prior to commencing rehearsal, I give my commitment to attend all rehearsals scheduled by the Director & Musical Director and all performances including any potential extra performances which may be included due to high demand. Any additional performances would be discussed with cast and crew prior to advertising.
- Comply strictly with any health and safety policies, directives or procedures of Auckland Music Theatre Inc, The Amici Trust, Amici Productions Ltd, Auckland Live and of any premises at which the rehearsals or performances are to be held.
- Follow any directions given to me by any member of the Production Team or by an authorised Head of Department.
- Return all scripts and scores when requested at the end of the performance season, accepting that failure to return these could result in an invoice being issued to me to cover any costs.
- Assist with the production in any way possible, including but not limited to rehearsals, wardrobe fittings, sponsor functions and promotional activities.
- Allow my photo to be used for production and marketing purposes, or any other purposes deemed fit by Auckland Music Theatre Inc, The Amici Trust and Amici Productions Ltd.

Signed: _____ Date: _____

PLEASE ENSURE YOU BRING THIS FORM PLUS A CURRENT PHOTO OF YOURSELF TO YOUR AUDITION.

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