



PLEASE ATTACH A RECENT PHOTO OF YOURSELF TO THIS FORM



## Audition Registration Form

Role you are auditioning for \_\_\_\_\_

### Contact Details & Casting Statement

Title: Miss/Master \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Parent or Guardians's Mobile: \_\_\_\_\_ Home Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Current Age: \_\_\_\_\_

Height(cm): \_\_\_\_\_ Hair Colour: \_\_\_\_\_

- 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
- Can we add your email address and contact details to the AMT & Amici Trust databases? Yes / No

Please state previous Theatre, Music or any relevant experience:

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

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.

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**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:

- 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 by the Parent or Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

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