

Signature

## THE HISTORIC COCOA VILLAGE PLAYHOUSE 34 Seasons of "Broadway on Brevard" AUDITION APPLICATION

## **OKLAHOMA**



Name (Last)	(First)	Current Age	Height	Weight	Employment / Schooling
Telephone (Day)	(Cell)		Email Address (Print Clearly)		
Address	City		State	Zip	
Check here if you	are a "Gold Star Performer" (Your	name is on a plaque in the	lobby for consec	cutive shows as	s a volunteer performer)
List specific role(	s) desired:				
Will you accept ar	ny role? Yes No (Circle	One) Will you acce	ept being doubl	e cast? Yes	No (Circle One)
Will you accept bein	ng an understudy? Yes No	(Circle One) Will you	u accept being	a swing? Y	ves No (Circle One)
Do you have:	Vocal Training? Yes No (	Circle One)			
	Dramatic Training? Yes N	No (Circle One)	and how long		
	Dance Training? Yes No	(Circle One)	and how long		
			and how long		
	s are committed to working with yo he key to the success of this, is to pr				at the product of our
	ntly cast in another production	_		l what are th	e performance and
• Are you auditi	oning for another production	between now and Feb	ruary 18, 2024	4	_ If yes, where and
what are the pe	erformance dates?				
• •	tial conflict dates between nov ional space, you may write addition	•		a will <b>NOT</b>	be available:
Previous perfo	orming arts experience (attach	resume if available):			
• Any health or	emotional conditions of which	h the Director needs to	be aware?		
Additional info	ormation you would like the I	Director to know:			
may be obtained in ac performances. Due to t	ree that if I am cast, it is my responsive that if I am cast, it is my responsive the from the Directors. It is also the evolving nature of certain illnesses, modely event of an outbreak of illness, by sign the spread illnesses.	so my responsibility to lead asks may be required for all pe	<b>rn the material a</b> erformers during the	<b>and be prepare</b> e rehearsal proce.	ed for rehearsals and ss and backstage for

Telephone (Print Clearly)

Date