



36 Seasons of "Broadway on Brevard"
AUDITION APPLICATION
GODSPELL



PLEASE FILL OUT THIS FORM USING A PEN. MAKE SURE WE CAN CLEARLY READ YOUR INFORMATION!

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 consecutive shows as a volunteer performer)

List specific role(s) desired: _____

Will you accept any role? Yes No (Circle One) Will you accept being double cast? Yes No (Circle One)

Will you accept being an understudy? Yes No (Circle One) Will you accept being a swing? Yes No (Circle One)

Do you have: Vocal Training? Yes No (Circle One) _____

List where and how long

Dramatic Training? Yes No (Circle One) _____

List where and how long

Dance Training? Yes No (Circle One) _____

List where and how long

NOTE: The Directors are committed to working with you on your scheduling conflicts if they are not so many that the product of our musical is affected. The key to the success of this, is to provide as much information below as possible.

• Are you presently cast in another production? _____ If yes, where and what are the performance and rehearsal dates

• Are you auditioning for another production between now and March 29, 2026 _____ If yes, where and what are the performance dates? _____

• List any potential conflict dates between now and March 29, 2026, which you will **NOT** be available:
If you need additional space, you may write additional conflicts on the back of this form. Please indicate if any dates include technical rehearsals or performances (i.e. Every Friday – The exception being Technical Rehearsals and Performances)

• Previous performing arts experience (attach resume if available): _____

• Do you have additional special skills or play an instrument? (i.e. Juggling, Skateboarding, Acrobatics, etc): _____

• Any health or emotional conditions of which the Directors need to be aware? _____

• Additional information you would like the Directors to know: _____

I understand and agree that if I am cast, it is my responsibility to arrive on time and attend all required rehearsals and performances. Excused absences may only be obtained in advance from the Directors. I also acknowledge that I have read the Welcome to Auditions sheet and am fully aware of the time and commitment required if I am cast. I will learn all required material and come prepared for rehearsals and performances. For the health and safety of all participants, I agree to stay home if I am ill and to follow any temporary health or safety measures the theatre may implement if circumstances require.

Signature _____ Telephone (Print Clearly) _____ Email (Print Clearly) _____ Date _____