

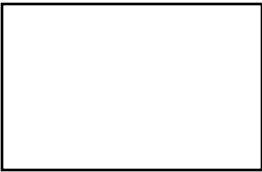


**THE HISTORIC COCOA VILLAGE PLAYHOUSE**

**32 Seasons of "Broadway on Brevard"**

**AUDITION APPLICATION**

**WEST SIDE STORY**



**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

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)**

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 Director is 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.**

- Have you been fully vaccinated for COVID-19? **Yes No (Circle One)**
- 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 February 27, 2022 \_\_\_\_\_ If yes, where and what are the performance dates? \_\_\_\_\_
- List any potential conflict dates between now and February 27, 2022 which you will **NOT** be available:  
*If you need additional space, you may write additional conflicts on the back of this form.*

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

• Any health or emotional conditions of which the Director needs to be aware?  
\_\_\_\_\_

• Additional information you would like the Director to know:  
\_\_\_\_\_

I understand and agree that if I am cast, it is my responsibility to be on time and attend rehearsals and performances. Excused absences may be obtained in advance from the Director. It is also my responsibility to learn the material and be prepared for rehearsals and performances. **Due to the evolving nature of COVID-19, masks may be required for all performers during the rehearsal process and backstage for performances. By signing this application, I agree to wear a mask and follow all other mitigation efforts necessary to help prevent the spread of COVID-19 and other illnesses.**

Signature Telephone Date