

AUDITION FORM
BEAUTY & THE BEAST JR

Audition # _____

entered by AATJ staff

Performer Name: _____ Performer Age: _____
Height: _____ Hair Color: _____ Eye Color: _____

Parent/Guardian Name(s): _____
Cell Phone #: _____ Other Phone #: _____
E-mail Address: _____
Home Address: _____

Audition Song: _____

Vocal Range/Type: _____

Type of roles you would like to audition for *(circle all that apply)*:

ACTING SINGING DANCING ACROBATICS/TUMBLING

Roles interested in: _____

Would you accept an Ensemble role? *(circle)* YES NO

Previous stage experience/recent productions: _____

Special Skills (list any special talents that may benefit this production):

Beauty & the Beast Jr.- Rehearsal Schedule

Weekly Rehearsals: Starting 2/7/23 – Tues/Wed. (6:45pm), Saturday (3pm)

Tech/Dress Rehearsals *(required)*: March 13-16

Performances: March 17-19

Cast members will not be required to attend every rehearsal.

CONFLICTS - List ALL Conflicts in detail. **List dates & full time frames** for each conflict. We will try and work around your conflicts as much as possible, but you must list ALL conflicts in order for us to do so! Conflicts with tech week & performance dates will not be permitted.

List Conflicts (dates/times), for potential rehearsals – from February 7 – March 19, 2023
If you need more space, use the back of this page or attach conflict sheet.

EMERGENCY CONTACT:

Name: _____ Relationship _____
Cell #: _____ Home Phone #: _____ Work #: _____

WAIVER AND RELEASE

I, Parent Name _____ give my permission to AND ALL THAT JAZZ! staff to call a person listed above, and an ambulance, in the event of an emergency. I recognize the risks of injury inherent in any theatre or dance exercise program. Participating in the AND ALL THAT JAZZ! program is dependent upon the express agreement and understanding that I am waiving and releasing AND ALL THAT JAZZ!, and all teaching staff from any and all claims, costs, liabilities, expenses, judgments, including attorney fees and court costs, (herein collectively "claims") arising out of participation in AND ALL THAT JAZZ! auditions, instructional programs, performances, and/or rehearsals, and any and all participation in any event or program given or sponsored by AND ALL THAT JAZZ! for any illness or injury resulting from. I hereby further agree to indemnify and hold harmless AND ALL THAT JAZZ! from and against any and all such claims.

I also give permission for AND ALL THAT JAZZ! to use any photos or videography taken of participants in the studio or during performances for promotional or other purposes.

I acknowledge that the person auditioning, parent/guardian and all others living in the same household do not have any symptoms of illness (for COVID-19 or otherwise). I agree to contact AND ALL THAT JAZZ! Staff if any symptoms of illness arise for further instructions.

Parent Signature: _____ **Date** _____