



Sweeney Todd AUDITION FORM

PLEASE PRINT NEATLY

*Do not forget to bring a Stamped Self Addressed Envelope
with you to the audition for your results to be posted to you.*

Please attach a
photo of yourself
here

Full name _____

Address _____

Post Code _____

Telephone (home) _____ Telephone (mobile) _____

E-mail Address _____

Name of School/College currently attending _____

Name of School/College (if different) from September 2010 _____

If not in full time education, name & address of employer _____

Date of Birth _____ Age _____

Height _____

Emergency contact name _____ Relationship _____

Emergency telephone (1) _____ (2) _____

I would like to be considered for:

Part: 1st choice: _____ 2nd choice: _____

3rd choice: _____

Would you accept another role other than choice? Yes / No

Would you accept a chorus role? Yes / No

List other productions you have been involved with _____

Please give details and dates of any other show commitments prior to this show.

Read carefully & sign (If under 18, a parent/guardian *MUST* sign.)

I understand that each cast member is required to pay a performance fee of £35.00 and membership fees are due quarterly of £10.00 due 1st March, 1st June, 1st Sept 2010. The membership fee covers insurance so it is essential that these fees are paid. Failure to pay the fees may result in dismissal from the show.

In order to ensure the quality of rehearsals and the performance itself, I understand that more than three unexcused absences from rehearsals may result in dismissal from the show.

I authorize and consent that Stoke Youth Musical Theatre Company shall have the absolute right to publish, use, sell, or assign any and all photographs taken of me as a participant in the above productions.

Signature: _____ Parent/Guardian

Signature of Person Auditioning _____ Date: _____