Adult (18 and older) Kankakee Valley Theatre Association Audition # \_\_\_\_\_\_

Child (17 and under) SHOW: *The Christmas Schooner* (2025) Gender\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 1: Auditioner Information:**

Name: Age: Birthdate: / / \_\_\_

Address: Hair color:

City: State: Zip: Height:

Email: \_\_\_ If auditioner is under 18, complete preferred email in Section 2.

Phone (cell): (other): \_\_\_ Gender Pronouns: \_\_\_\_\_\_\_\_\_

**Section 2 (FOR AUDITIONERS 17 AND UNDER ONLY) Parent/Guardian Information: Please circle main contact**

Mother/Guardian #1 Name: Email:

Father/Guardian #2 Name: Email:

Guardian #1 Cell: Guardian #2 Cell:

Addtl Contact Cell: Relationship to Auditioner:

**Section 3: Conflicts:** Please list all conflicts that might keep you (or your child) from attending any part of a rehearsal from the audition dates until the final performance. Please be completely honest. **Conflicts won’t necessarily preclude you from being cast in this show.**

 **Section 4: Previous Experience:** You can list up to five (5) examples of previous production experience.

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**Section 5: Roles You Are Interested In**:

\_\_\_\_\_ I will **ONLY** accept the role(s) I have marked at the right #1:

\_\_\_\_\_ I am interested in the role(s) listed, but will accept **ANY** #2:

 **ROLE INCLUDING ENSEMBLE** #3:

\_\_\_\_\_ I am ONLY interested in an ensemble role #4:

**Section 6: Voice/Dance Experience:**

* Circle the voice parts you sing: UNKNOWN Soprano Mezzo Alto Tenor Baritone Bass
* Are you comfortable singing: **Solo?** YES NO / **Harmony?** YES NO / **In A Chorus?** YES NO
* Do you have any dance experience: YES NO - If yes, explain:

**Section 7: Other Information**

If more than one family member is auditioning, is there a problem with only one person being cast? YES NO

Comments:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Section 8: Cast Member Requirements:**

1. I understand that if I am cast in the show, I must become a paid general KVTA member ($30) by the date given by the Director and Production Coordinator. If your auditioner is cast in a show at least one parent/guardian must become a paid member by the due date. Failure to pay by the deadline will result in the cast member not being able to rehearse until said membership is paid in full.
2. I understand that the use of alcohol, illegal drugs, marijuana, and/or vapor products is strictly prohibited before and/or during KVTA rehearsals and performances.
3. Cast members must attend all scheduled rehearsals. Any conflicts not listed on the front of the audition form or the conflict calendar must be approved by the Director. Unexcused absences may result in the cast member being replaced in the production.
4. A child must be at least 6 years of age by the date of the first performance to audition for any KVTA production. No individual older than 17 years of age by the date of the first performance is eligible to audition for a Young Peoples Theatre production. Proof of age may be requested.
5. If the production you are auditioning for is a YPT production, all actors cast will have to miss two (2) days of school to appear in the scheduled school performances.
6. All adult cast members must complete a minimum of 10 hours of volunteer technical work when cast in a KVTA production. Parents/guardians of actors ages 17 and under must fulfill this requirement for each child cast in a KVTA production. Cast members age 18 and older, when necessary, may designate another adult to fulfill the requirement for them (example: someone age 18 in a show can’t fulfill his/her 10 hours so their adult sister volunteers and completes them for the cast member).
7. If cast, actors must furnish shoes, including dance and/or street shoes, and any items of a personal nature. KVTA will furnish period costumes; however, assistance in obtaining accessories or special costume pieces may be requested.
8. KVTA is a family-oriented organization. Please remember that while participating in a KVTA sponsored function, what you say and do is not only a reflection of your values, but of KVTA’s as well. Appropriate language and dress are expected. **A signed KVTA policies acknowledgement form will be required.**

**Section 9: Releases:**

**ADULT** **Auditioner:**

KVTA has permission to use my picture and/or name for publicity in print and online.

**CHILD** **Auditioner:**

KVTA has permission to use my child’s picture and/or name for publicity in print and online.

**EMAIL Use:**

 By auditioning, you are agreeing to receive notice when we are looking for volunteers, or sending out general

KVTA information. KVTA will not give out your email address to other organizations.

By signing this form, I promise to make each KVTA production the best it can be and to help publicize the production in the community. I verify that I have read the KVTA requirements listed above. I understand that failure to abide by them may result in being removed/replaced in the production. I voluntarily waive, release, and hold harmless Kankakee Valley Theatre Association, its board, employees, agents, and other volunteers from all claims, accidents, or injuries, that may result from actions related to my volunteer activities.

Auditioner Signature / or Parent/Guardian Signature for Youth Auditioners Date