

Adult (55 and over)

Kankakee Valley Theatre Association

Audition # \_\_\_\_\_

SHOW: *Fiddler on the Roof* SR (2026)

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 4: 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 5: 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 6: Other Information**

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

Are you available during the day for any rehearsals Monday through Friday, if needed? YES NO

Are you available for weekend rehearsals, if needed? YES NO

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 7: Cast Member Requirements:**

1. I understand that if I am cast in the show, I may become a paid general KVTA member (\$30).
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. An auditioner must be at least 55 years of age by the date of the first performance to audition for a KVTA Senior Theatre production. No individual younger than 55 years of age by the date of the first performance is eligible to audition for a KVTA Senior Theatre production. Proof of age may be requested.
5. All adult cast members may complete a minimum of 10 hours of volunteer technical work when 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 the hours for the cast member).
6. 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.
7. 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 8: Releases:**

**ADULT Auditioner:**

KVTA has permission to use my 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

---

Date