

Richmond Civic Theatre Audition Form

Name _____ Date _____

Address _____ City _____

E-mail _____ Are you on Facebook _____ Twitter _____

Preferred Phone # _____ Home _____ Work _____ Cell _____

Would you like to be on RCT information via email? Yes No Or regular mail? Yes No

Male _____ Female _____ Height _____ Weight _____ Age _____

Role(s) of interest _____

If not chosen for this role, are you willing to take another? Yes No

Are you willing to cut/dye your hair, if necessary, for the role? Yes No

MEN ONLY: Are you willing to shave/grow facial hair, if necessary, for the role? Yes No

Previous Theatrical Experience, Including Technical:

Part	Show/Venue/Dates

Please provide a list of possible conflicts on back of page

DIRECTOR'S NOTES

