

SpongeBob Jr. Musical
AUDITION FORM

PLEASE COMPLETE AND RETURN THIS FORM BY **DECEMBER 8TH** TO MRS.
SMITH RM 42

AUDITION DATE: Tuesday 12/ 12
AUDITION LOCATION: CAFETERIA
TIME 3 PM – 5PM

NAME: _____ **GRADE:** _____ **HOMEROOM #** _____

PARENT NAME: _____ **PHONE#:** _____

Parent Signature: _____

I have read and agree to my child trying out for the play. I understand the commitment this will require. There are no conflicts with Tech Week and performance dates. I will provide transportation from all rehearsals.

REHEARSALS WILL BE 3:00 - 5:00 PM (at the latest) on various Mondays/ Wednesdays and Thursdays from January to May. NO FRIDAY REHEARSALS

TECH WEEK April 29 – May 2

PERFORMANCES MAY 3rd 7 pm Curtain Call 6pm

MAY 4TH 3 PM AND 7PM Curtain Call 2pm

If you are not able to be at ALL scheduled performances and tech week , I'm not able to use you in this production.

Past Theatre Training and experience (none required) and/or unique talents (juggling, acrobats, dancing etc.)

If you have a conflict on any Mondays, Wednesdays or Thursdays, please explain

TURN OVER

Roles Available: (See SpongeBob Character Breakdown Sheet)

Some ensemble/chorus roles in SpongeBob will be cast in multiple roles.

Please indicate the role(s) for which you would like to be considered.

If you are **NOT** cast in the role(s) interested, are you willing to accept another role?

YES or **NO** (circle one)

If you are **NOT** cast in a role would you be willing to work on the production crew?

YES or **NO** (circle one)

DIRECTOR NOTES: