Lewiston Civic Theatre Season Audition Form

Number Date	e				
	, etc. Your required add	itional contributi	ion to this pr	euch as the shows production, set roduction will be about <u>eight</u> hours. The second s	
Director and Costumer.	Initia	als			
Name:					
Pronouns: □He/him □ She/her	□They/them Hei	ght:	Age:		
Address:					
City:	Sta	nte:		Zip Code:	
Phone Numbers (Check the numb	er that is best to reach y	ou with)			
□Home:	_ □Cell:		□	Work:	
E-Mail:			_ Do	you have a Facebook Account?: Yes	V٥
Please select which show(s) you ☐ A Christmas Story, the Music ☐ School of Rock, the Musical Role(s) you would like to read (I ☐ am/ ☐ am not willing to p	al □ I Love You, You □ Any Show for:	're Perfect, Nov	J		
Polo(s) you will not assent:	Will account any role				
Role(s) you will not accept:	wiii ассерт апу гоге				
Please note any special skills, i	.e. singing, dance, jug	gle, etc.			
If not cast, I would be willing to we	ork on set construction,	painting, backsta	age crew, ligl	hting, costuming, etc?	
Sign:				(Parent or Guardian if not 18 years o	d)
				OT WRITE IN THE SPACE	
Reading Notes:					
Yes/No					

Rehearsals will be Monday through Friday at the LCT Box Office (832 Main St, Lewiston) & the Normal Hill Campus (1114 9 th Ave). You are required to attend all rehearsals of scenes and numbers that you are in. Most rehearsals will take place during the week between 6PM to 9 PM. The closer to opening night, rehearsals will increase in frequency and your time commitment is very important.
Performance Dates: Christmas Story – Nov. 30 – Dec. 17; I Love You Jan. 18 – 28; Peter and the Starcatcher – Mar 1 – Mar 17 (No Thurs Performances); School of Rock – June 6 - 23
We ask that you do not disclose your casting status until after LCT has made an official post. This is to ensure everyone who has auditioned has had ample time to be notified and have accepted their role.
Theatre Experience: ☐ Please see attached resume.
Please List any scheduling conflicts you may have with rehearsal or the show (Please list all known dates) If auditioning for multiple shows – please list all dates that would conflict with any show.
Do you have any allergies or medical issues that would be helpful for the director and staff to know about?

 \square Yes \square No (If yes, please list below – If you'd rather discuss during your audition, please check here \square)