

# AHJS Drama Club Audition Form

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Eighth Period Teacher: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email : \_\_\_\_\_

Notes: (Sponsors use only, please leave blank)

Roles Desired:

First Choice \_\_\_\_\_

Second Choice \_\_\_\_\_

Third Choice \_\_\_\_\_

All Performers: Previous Experience- (You are not required to have previous experience.)  
Please list all previous singing performances and/or dance performances here:

List any special talents you have (juggling, gymnastics, etc):

## **Times and Dates**

Audition Dates: September 13 through September 15 @ 4:05 to 4:45  
(only one audition day/time per person)

Rehearsals: Monday, Wednesday & Thursday 4:05 to 5:00  
(a calendar will be given to cast and crew)

Dress Rehearsals: February 17 and 18 @ 3:35 to 5:00

Performances: December 13 & 14 at 6:30 pm to 7:30 p.m.

( Play participants must be present by 5:45 on performance nights.)

Explain any possible conflicts with rehearsals (doctor appointments, out-of-town trips, etc.)

---

---

---

**Please Note: Excessive absences from rehearsals will result in removal from the performance. Student Signature:** \_\_\_\_\_

(Rehearsals will be Monday, Wednesday, and Thursday from 4:05-5:00. A calendar will be sent home with rehearsal times and dates. Our performances will be December 13<sup>th</sup> & 14<sup>th</sup> at 6:30. Performers must be in the Little Theatre by 5:45. Information and calendars can be found on Mrs. Buentello's web page.)

**Please Note: You must be passing all of your classes in order to participate in rehearsals and the performance. If you are not passing a class, it is preferred that you attend tutoring rather than rehearsals. In addition, you must maintain good behavior. (Refer to Code of Conduct) Stays in On Campus Suspension, Robbins, or Suspensions from School will result in you not being able to participate in rehearsals or the performance.**

**Student Signature:** \_\_\_\_\_

Parent/Guardian Permission

\_\_\_\_\_ is allowed to participate in Drama Club after school. I realize that my child will be required to attend rehearsals after school as well as the performances. I also understand that for the above mentioned reasons, my child may be removed from the privilege of participating in Drama Club.

\_\_\_\_\_  
Parent/guardian printed name

\_\_\_\_\_  
Parent/guardian signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Contact Information (email/cell phone #)