

# GTC DINNER THEATER

## AUDITIONS



### CONTACT INFORMATION *(Please print very neatly)*

Name	
Age (if under 25)	
Street Address	
City, ST, ZIP Code	
Cell Phone	May we text you? <input type="checkbox"/> Y <input type="checkbox"/> N
Home Phone	
E-Mail Address	
Are you (or your parent, if age 17 or under) on Facebook?: <input type="checkbox"/> Y <input type="checkbox"/> N	

### EXPERIENCE *(Don't worry – all experience levels are welcome!)*

Please tell us which areas you have experience in, and describe your experience:

<input type="checkbox"/> <b>Performances</b> ( <i>Plays, Acting, Public Speaking, etc.</i> ) Describe:
<input type="checkbox"/> <b>Training</b> ( <i>Private Voice Lessons, Workshops, etc.</i> ) Describe:
<input type="checkbox"/> <b>Classes</b> ( <i>High School, College, Studio, etc.</i> ) Describe:
<input type="checkbox"/> <b>Special Skills</b> ( <i>Gymnastics (cartwheels, etc), juggling, or any other relevant skills</i> ) Describe:
<input type="checkbox"/> <b>Other</b> ( <i>May include sound, lighting, or other relevant theater experience</i> ) Describe:

### DESIRED ROLE(S) *(See separate list of Character Descriptions)*

Below, list the specific parts you are auditioning for.


- Would you accept other roles if offered?: ☐ YES ☐ NO
- If you are not cast in this show, would you be interested in helping in other areas of the production (i.e. stage help, tech crew, costumes, etc)?: ☐ YES ☐ NO  
Which area(s)?: \_\_\_\_\_

**PLEASE CONTINUE ON OTHER SIDE**

## SCHEDULING AND CONFLICT NOTIFICATION

**IMPORTANT:** Prior to completing this page, please review the [Rehearsal Calendar](#) and [Important Information](#) page for additional details related to scheduling and expectations.

Below, please list ALL dates you are unable to attend rehearsals. Conflicts not listed on this form cannot be provided after the fact, and unfortunately, no exceptions can be granted for conflicts not provided in advance of casting.


## AGREEMENT AND SIGNATURE

I, the undersigned, commit to make production rehearsals a priority, and apart from the scheduling conflicts stated above, will attend each rehearsal for the role I receive if I am cast in this show.

Name (printed) & Date	
Signature	

***If you are age 17 or younger, parental review & signature are also required:***

As the parent responsible for this cast member, I commit to making their production rehearsals a priority, and apart from the scheduling conflicts stated above, will ensure that my minor attend each rehearsal for the role received if they are cast in this show.

Name (printed) & Date	
Signature	

## OUR POLICY

It is the policy of Generations Theater Company to provide equal opportunities without regard to race, color, religion, national origin, gender, gender identity, sexual orientation, age, or disability.

Thank you for completing this audition form. *Break a leg!*

# GTC DINNER THEATER

## IMPORTANT INFORMATION



Please be familiar with the audition materials for the role(s) you wish to audition for. It is not necessary to memorize the audition materials.

Please arrive 10 minutes prior to your audition time.

### WHAT TO BRING

- **Completed Audition Form** – we suggest that all auditionees review all audition-related materials and complete their audition form *prior* to arriving for their audition slot. If you are unable to bring your completed audition form, we will have additional copies available to fill out. Please arrive with plenty of time to complete your form prior to your audition timeslot.
- **Headshot** – If you have not been in a production with GTC before, please bring a headshot (photo of yourself from your shoulders up). *Prior cast members – no headshot necessary.*

### PERFORMANCES

There will be 3 performances for the GTC Dinner Theater: **August 23<sup>rd</sup> – 25<sup>th</sup>, 2024 at 6:30pm each evening.**

### REHEARSALS

Bringing a fantastic production such as GTC Dinner Theater to life requires a lot of passion and commitment. With such a dynamic cast required, we cannot stress enough the importance of our rehearsal times together. When even one person is absent, everyone feels it, as we play off each other in each and every scene we perform together. If cast in this show, please make it a priority to be at every rehearsal you are scheduled to be part of.

### REHEARSAL SCHEDULE EXPECTATIONS

While rehearsal schedules are prepared in advance of shows, it is important to know what to expect. While our goal is to wrap up each rehearsal by 8:30pm, we appreciate your flexibility the week leading up to the performances, as there may be a need to stay a bit longer in order to tighten up some scenes. Thank you in advance for your understanding!

### COSTUMES

Cast members will be responsible for providing their own shoes, socks/hosiery, and potentially certain costume pieces. This will be communicated by the Director to you in advance of performances.

Stage shoes – We request that cast members have approved shoes sooner than later, to get used to wearing them during scenes. The type of shoe needed for your character(s) should be communicated to you by the Director and/or Costume Lead, but please do not hesitate to ask. Once you have the shoes, please ask the Director for final approval.