



A Night of the Arts

A Celebration of the Lord's gifts at Berean

Audition Form

(only fill out 1 form if you are a group)

NAME: _____ GRADE: _____

EMAIL: _____ PHONE: _____

PARENT EMAIL or PHONE: _____

EXPERIENCE

Please list any performance experience: _____

PERFORMANCE INFO

Performance Type (circle one):

Acting Dancing Magic Music Poetry Singing Other: _____

Performance or Song Title: _____

Additional Performer(s) Name(s) if a group: _____

Performance Needs (circle and indicate how many needed):

Microphone(s) _____ Microphone Stand(s) _____ Chair(s) _____

Piano _____ Extension Cord _____ Large Movement Space _____

AVAILABILITY

There will be a mandatory technical rehearsal held on _____, from _____ to _____. The Talent Show will be _____ at _____.

PARTICIPATION

Are you willing to accept an usher, box office, or snack booth position if you are not cast?

YES NO If YES, what type of position? _____

AUDITION CONTRACT

I _____ understand and agree that auditioning for the Talent Show or any other production in no way guarantees that I will be cast. I also understand and agree that past participation in other school performances in no way guarantees that I will be cast. I understand and agree that casting is up to the discretion of the director and that casting choices are based on the merit of the audition as well as balance of show act variety. I understand that if I am cast in the Talent show as a performer or backstage worker, I will be expected to participate fully and to the best of my ability.

Signature: _____