

# INSTRUCTIONS

## FAIRY TALE THEATRE REGISTRATION AND AUDITION FORM PARENT PERMISSION & EMERGENCY INFORMATION FORM

1. Complete both the “Parent Permission & Emergency Information Form” (page 2) and the “Registration and Audition Form” (page 3) by typing in the blocks indicated. Duplicate information will automatically be entered on the remaining forms (pages 4-5). These forms may also be filled out by hand.
2. Print this file. It will print one copy of these instructions, one copy of the “Parent Permission & Emergency Information Form,” and four copies of the “Registration and Audition Form.”
3. Sign the “Parent Permission & Emergency Information Form.” Bring to the audition with you.
4. Bring all three copies of the “Registration and Audition Form” to the audition with you.

**Fairy Tale Theatre**  
**Parent Permission & Emergency Information Form**

**Every section must be signed**

**Actor's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone: Home** \_\_\_\_\_ **Work** \_\_\_\_\_ **Cell** \_\_\_\_\_

**Allergies or other physical limitations:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

\_\_\_\_\_ **has my permission to participate in Fairy Tale Theatre.**

**Parent or Guardian's Name** \_\_\_\_\_

**Signature: (parent or guardian):** \_\_\_\_\_

**Emergency Contact (if parent is unavailable)**

**Emergency Contact's Name:** \_\_\_\_\_

**Phone: Home** \_\_\_\_\_ **Work** \_\_\_\_\_ **Cell** \_\_\_\_\_

**THE FOLLOWING MUST BE SIGNED BY A PARENT OR GUARDIAN**

**Injury Waiver**

I agree not to hold the Vicksburg Theatre Guild, including its Board of Directors, Directors of Fairy Tale Theatre, and Producers of Fairy Tale Theatre, responsible for any injuries obtained in conjunction with the auditioning and production of Fairy Tale Theatre or while on the premises of the Parkside Playhouse.

**Internet Permission**

I give permission for photos of my child to be published on the VTG website and Facebook page.

**Commitment of Attendance**

My child \_\_\_\_\_ is committed to attend any and all rehearsals of the Fairy Tale play that he/she is chosen to perform in. It is understood that missing **MORE THAN THREE** rehearsals will result in having to surrender his/her part. It is also understood that none of the days missed may be a dress rehearsal or performance. The only exception will be illness resulting in hospitalization or a death in the immediate family. Any child who has attended five rehearsals will not be eligible for a refund.

Signed: (parent) \_\_\_\_\_

In order to ensure the success of any theater production, it is vitally important that each cast member be present for rehearsals. Thank you for your cooperation.

**DO NOT WRITE BELOW THIS LINE**

\*\*\*\*\*

**Play cast in** \_\_\_\_\_

**Part** \_\_\_\_\_



*Due to the Corona virus, we are not sure when we will have auditions. We would like to go ahead and gather names of youth who are interested (for this June 2020).*

**FAIRY TALE THEATRE REGISTRATION  
AND AUDITION FORM**

Actor's Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Height \_\_\_\_\_  
*(Must be 7 yrs. old) (feet & inches)*

Address \_\_\_\_\_

Parent or Guardian's Name \_\_\_\_\_  
*(With whom you live)*

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Email address \_\_\_\_\_

If you must be in a play with someone for car pool purposes, please list his/her name here:

\_\_\_\_\_

Please mark time slots all that you prefer and can attend.

TBA morning     TBA early afternoon     Musical 4 - 6:30 p.m.\*

<p><input type="checkbox"/> I wish to be considered for ALL plays.</p> <p><input type="checkbox"/> I wish to be considered ONLY for the MUSICAL.*</p> <p><input type="checkbox"/> I can be in more than one play.</p> <p><b>*The MUSICAL play rehearses in the last time slot, 4 - 6:30 p.m.</b></p>
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Would you sing on stage?     yes     no

Would you dance on stage?     yes     no

What size part you are interested in?

0-10 lines     11-25 lines     26-99 lines     100-250+ lines

Please list experience you have had onstage (VTG and other venues).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Schedule Conflicts: \_\_\_\_\_



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