

Chapin Theatre Company
Youth Troupe
Audition Form

Name: _____ Age: _____

School: _____

Address: _____ Email: _____

Home Phone #: _____ Cell Phone #: _____

List Any Drama/Theatre/Vocal/Dance Training:

Previous Roles/Theatrical Experience (not including school or church) Please list Theatre and Director:

List your strengths in order of the following: Acting, Singing, Dancing

1. _____ 2. _____ 3. _____

This Troupe is a self sustaining and producing troupe.

Are you willing to participate in fundraisers for the troupe? YES NO

Are you willing to help/talented with the following production jobs as part of the troupe:

Costuming? YES NO

Props? YES NO

Lighting? YES NO

Sound? YES NO

Script Writing? YES NO

Stage Management? YES NO

Do you have any unusual skills (juggling, unicycle, tumbling, etc)? Please list:

Troupe will rehearse at least one day/night a week, depending on the availability of the members. Please list all ongoing commitments that you have that would make you unavailable to rehearse (ie: you have dance every Tuesday night from 6 – 8pm. Or you have church group on Wednesday nights or Sunday nights, etc.)

What does Theatre mean to you and why do you think it is important?

Tell me a story about yourself:

**What do you think is the most important issue facing kids these days?
Your age? And younger?**

Troupe will not meet a lot and some things will be your responsibility to do on your own and come back prepared. Do you think you are self motivated?