

AUDITION # _____

SHOW NAME: _____

LOCATION OF SHOW: _____

SHOW DATE: _____

THIS IS A FUNDED EVENT _____

THIS IS NOT A FUNDED EVENT _____

www.kingdombluedm@yahoo.com

**KINGDOM BLUE
PRODUCTIONS**

Actor Audition/Casting Form

**PRINT
NAME:**

**TO DAYS
DATE:**

**AGE &
DOB:**

Phone:

ADDRESS:

C/STATE:

EMAIL:

Minor Adult Female Male Animal

1. Previous Experience _____

2. Other known languages _____

3. If minor give name of guardian _____

4. Details of experience of acting _____

5. Details of training _____

6. Education _____

7. Previous performances _____

8. Desired Roles _____

9. Talents _____

10. Conflicts _____

11. Height _____

12. How did you find out about us _____

13. Any musical instruments _____

14. Hobbies/information about yourself _____
15. Are you casting in a role now _____
16. Rehearsals are required not missing any more than three, are you will to agree _____
17. Is there anything that will conflict with you not able to fulfill your part in the production _____
18. Please look carefully at your schedule to make sure that there wouldn't be any conflicts with the rehearsal or performance schedule for your selected production listed above. If there are, list any and all conflicts. _____
19. PORTRAIT (UPLOAN IMAGE) Browse

I hereby declare that the above information given on the audition form are true. Please check... Yes _____ or No _____.

*By checking this box, the candidate and parent or guardian (if a minor) release Kingdom Blue Productions of all legal responsibility in case of accidents resulting in bodily or mental harm which occur in due course of rehearsals and or productions. (REQUIRED)

SIGNATURE OF THE APPLICANT

* _____

DATE OF THE APPLICANT

* _____

NOTARY

* _____

DATE

* _____