

The Rockaway Theatre Company

Sign in#

Fort Tilden, NY 11695Website:

www.rockawaytheatrecompany.org Fax (718) 474- 7469

Audition Form		<i></i>				
Audition Form Contact Info	II. Please	fill out as co	ompletely as po	ssible. Use ba	ack of form	if necessary
Name						
Address						
Email Address						
Telephone Cell Home						
What role(s) are	vou audit	ionina for?		rionie		
Would you conside	•			ı consider sk	narina the	role?
Would you consider another role? Would you consider sharing the role? How will you be traveling to the theatre? Public transportation: Car: Other						
How did you hear				ansportation	<u>. </u>	
1.500 ala you neur	about III	is addition	•			
Past Production	<u>าร</u> List :	show, role	+ company. Is	Resume Att	ached?	Head Shot?
(Fill this section only if no resume is available)						
Technical Expension Stage Crew Lighting So		Manageme		n: (Check any ume design/0 Props		
Availability and Conflicts: List days and times during which you will be available to rehearse in the next ten weeks.						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Notes and Comme		Be Filled	in by Casting	Director On	ly:	
PUBLICITY RELEATION I am aware that if I publicity purposes	l am cast i		-			

Signature_