RICHMOND PLAYERS' AUDITION FORM
– The Mysterious Amateur Tramp

First Name: ..... **Surname:** .....

Address: .....

.....

Phone (H): ..... **Phone (M):** .....

Email: .....

Age: 20s 30s 40s 50s 60s 70s

Which role/s are you interested in? .....

.....

Please list your previous experience or attach your entertainment CV: .....

.....

.....

.....

Are You a current member of Richmond Players? (Please Circle) **YES** **NO**

All cast and crew must be current members. Membership forms are available from the Stage Manager.

How did you hear about this audition? (Please Circle) Word of Mouth Social Media Other

If not cast, are you interested in assisting with: (Please Circle)

Stage Management Backstage Crew Front of House (FOH)

Lighting Sound Set Construction/Painting Props

I have read and agree to the costs and conditions for this production, and I agree for my photo/image to be used by Richmond Players for promotional purposes.

Signature: ..... Date: .....