



The Foundation Of Arts

Footloose Auditions July 30th at 530 and July 31st at 11 am
Audition Information form
Please PRINT legibly.

Name _____ Birth date ____ - ____ - ____ Age _____ Height _____

Parent/Guardian(s) Name (if applicable) _____

Mailing Address _____ City _____ Zip _____

Cell Phone _____ 2nd Cell Phone _____ Work Phone _____

E-mail _____ School _____ Employer _____

May we provide your contact info to cast members? _____

Please check all the statements that apply to you:

- In addition to/in lieu of being on stage, I can help with _____.
- Please consider casting me only in a **non-speaking** role.
- I would really like a solo
- If I'm not cast in a solo role(s), feel free to **consider me for any role**.
- Please do not consider me for the role(s) of _____
- Please take the following physical condition(s) into consideration if I am cast:

- I can dance and have dance experience. _____ What about tap? _____
- I am willing to work on the set and/or costumes whether or not I am cast
- I am currently in an FOA class. If so, which one? _____
- I have taken an FOA class in the past. If so, what?
when? _____
- Here is the name (names) of the person I'm auditioning with. How important is it that you are cast together?
Explain _____

**Rehearsals August 3rd through
September 17th**

**Showtimes are September
18th, 19th, 20th, 25th and 26th
EES is September 22nd**

If there are **any times** between now and May 1 that you will **not** be able to be present, list them on back. (work, camp, vacation, ACT prep class, church, etc.)

Note: Church on some Wednesdays, especially the final two weeks, may be affected by rehearsals. Please note if you will NEVER be able to attend Wednesday rehearsals.

Important Notice:

