



General Audition Form

Market House Theatre

Please complete this form and provide a copy for each audition.

Headshot

Optional. Attach or upload a good image of yourself in the box on the right.

1

Your Name

2

First Name _____

Last Name _____

Contact information

For auditionee. Parent contact information is collected later.

3

Email _____ Phone _____

What's the best way to contact you? Call Text Email

Residential address

Provide the address where you currently live. *Please do not use a P.O. Box.*

4

Address _____

City _____ State _____ ZIP Code _____

Auditionee information

5

Pronouns _____ Date of birth (mm/dd/yyyy) _____

Hair Color _____ Height _____ Vocal Range _____

Allergies _____

Limitations _____

Casting Information

6

List any role(s) you are interested in _____

Will you accept any role offered? Yes No

If *no*, please list any roles you will **not** accept _____

If I am cast in this production, I agree to not make any changes to my appearance without prior approval from the director and creatives. This includes, but not limited to; hair cuts, changing hair color, and/or shaving.

By checking this box, I agree to not make any changes to my appearance.

Conflicts

List all schedule conflicts. Adding later may lead to replacement. A full schedule will be provided in week one. Write "NONE" if you have no conflicts.

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Conflict 1 _____ Date(s) & time(s) _____

Conflict 2 _____ Date(s) & time(s) _____

Conflict 3 _____ Date(s) & time(s) _____

Conflict 4 _____ Date(s) & time(s) _____

Conflict 5 _____ Date(s) & time(s) _____

I have additional conflicts that do not fit on this for. I have attached a page to this form listing those conflicts.

Experience

Experience is not required. If you do have prior performance experience, list the most recent or relevant. If you have an acting resume, please attach it.

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Suggested format: Production Name, Company/Organization, Role, Year

Example: Waitress, Market House Theatre, Jenna, 2025

Experience 1 _____

Experience 2 _____

Experience 1 _____

I have an acting resume that I would like to provide. I have attached my resume to this form.

Special skills

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Do you have any dance experience? Yes No

Do you have any gymnastics experience? Yes No

Do you have any special skills? Yes No

If *yes to any*, please describe _____

Parent information

If auditionee is under age 18, complete this section.

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Parent Name _____ Relationship _____
Email _____ Phone _____
What's the best way to contact you? Call Text Email

Volunteer information

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I am interested in volunteering in the following areas:

Development - Events & Fundraising	Marketing - Media & Promotion	Production - Directing
Education - Youth Programs	Onstage - Musician	Production - Paint & Props
Facilities - Maintenance & Grounds	Operations - Admin & Data	Production - Scenic Build
Front of House - Ushering	Production - Backstage Crew	Production - Stage Management
General - Flexible Help	Production - Costumes	Production - Tech

Background check

If auditionee is over age 18, complete this section.

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To help keep our programs safe for young people, Market House Theatre conducts background checks on adult volunteers and participants who may work with minors. If you are offered a role, participation is contingent on completion of a background check. Individuals who are required to register as a sex offender are not eligible for any MHT role or activity that involves contact with minors.

I authorize MHT to conduct a background check. Yes No

Auditionee, sign and date here (required)



Date

Liability and media release

If the auditionee is under age 18, a parent/guardian will need to complete this section.

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Please read the following agreements.

Participation & Health Acknowledgment

I confirm that I (and any minor(s) under my legal guardianship) am/ are physically able to participate in Market House Theatre (MHT) activities. I understand that participation may include (but not limited to) risks of injury, including risks that cannot be eliminated. I voluntarily assume these risks for myself and for any minor(s) under my guardianship.

I release and hold harmless Market House Theatre, its officers, directors, employees, volunteers, and agents from claims arising out of my participation in MHT activities.

Media Release

I grant Market House Theatre (MHT) and those working with or on behalf of MHT permission to photograph and/ or record me and any minor(s) under my legal guardianship during MHT rehearsals, performances, classes, and other activities.

I authorize MHT to use, reproduce, edit, and distribute these images and recordings for any purpose, including (but not limited to) publicity, promotion, advertising, education, documentation, and archival use, in any media now known or later developed, worldwide, without compensation, in perpetuity.

I understand I may not inspect or approve the final materials. I release and hold harmless MHT, its representatives, partners, employees, officers, directors, and volunteers as well as any other individual, corporation, or entity acting under their permission from claims related to the use of these materials.

By signing below, I agree to the terms of this Participation & Health Acknowledgment and Media Release and confirm that I have read and understand them. No amendment or modification is valid unless it is in writing and signed by both me and an authorized representative of Market House Theatre.

Auditionee or parent/guardian, sign and date here (required)



Date

Emergency contact information

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Name _____ Relationship _____
Phone _____

Market House Theatre use only