



ACTORS

Centennial Theater 2026 Audition Form

"Fall Play"

PLEASE ATTACH A PHOTO OF YOURSELF TO THE TOP OF THE AUDITION FORM
You must have this form filled out with a photo at the time of the audition.

NAME _____ GRADE _____

Email _____

Phone number _____

Parent/Guardian Name/Email/Phone Number

PLEASE REFER TO THE SCHEDULE FOR THE FALL PLAY AT **CENTENNIALTHEATRE.ORG** AND LIST YOUR CONFLICTS HERE. **(Actors are only allowed 5 excused absences before October 5th. Actors must clear their schedules of all conflicts October 5th - performances.)**

If cast, do you prefer to have a smaller role or nonspeaking? Yes No

If you are not cast, do you want to be on a waitlist for a crew for fall play? Yes No
If yes – which crew? (Circle One) - Booth / Set / Costume

Parent Section – (Please initial all lines below) For my child to audition, they must:

_____ My student **MUST** bring this audition form filled out and signed to auditions.

_____ All students auditioning for acting roles must provide a current photograph attached to this form. (We will not return the photos.)

_____ I know the schedule is posted at centennialtheatre.org and I understand that my child must clear their schedule of all commitments and be available for the majority of rehearsals and **ALL** performance nights. Students should not have conflicts with more than 5 of the scheduled rehearsals before 10/5. After 10/5, they are expected to attend all rehearsals. This does not include family emergencies or illness. I understand that changes to the schedule may happen and will be posted on the theater **“Band” app and online at the website - Centennialtheatre.org**

_____ I will Communicate Questions/concerns with the directors, the show, or the production at the appropriate times. I understand that outside feedback during rehearsal or performance time detracts from the student-director relationship and the performing environment. Questions/concerns during rehearsal or shows can be directed to our liaison at marketing@centennialtheatre.org. They will ensure your questions/concerns are routed to the appropriate director. Your questions/concerns are important to us and will be answered in a timely manner.

_____ I understand performances are, 10/29 & 10/30 at 7:00 PM, 10/31 at 3:00 PM, and 11/1 at 1:00 PM, and my student will attend all performances.

_____ I understand that online ticket prices for performances are \$10 for adults and \$7 for children/senior citizens.

_____ I understand that my student must be on time for all shows/rehearsals, and demonstrate respect for other students in the cast and crew. Any violation of theater, district, or school policies may result in the student's removal from the show.

_____ My student must be registered, **AFTER CASTING IS POSTED**, through community education (\$165) before the first rehearsal.

PHOTOGRAPHY/VIDEO RELEASE:

I understand that pictures and/or videos involving my student will be taken during the student's participation in this production and that the photos/videos may be used to promote the show and will be shared with participants in the production and their families.

I understand this information, and I consent to the use of any photos and videos of my student for the promotion of the show and to the sharing of photos and videos involving my student with the show participants and their families.

Parent signature: _____