



## Broken Arrow Community Playhouse

Welcome to the BACP!

We are pleased to welcome you to this audition. The Broken Arrow Community Playhouse is truly a "community theatre" operated almost entirely by volunteers. We hope that you have a pleasant experience at the Playhouse and that you will continue to be involved with us in the future.

- ❖ All auditions are open to any interested performers. The BACP has a strict policy against the practice of "pre-casting" and every role is available at the time auditions begin.
- ❖ Fill out an "**AUDITION SHEET**" for this production. This form will be used by the Guest Director to evaluate your audition. It is important to know your possible conflicts during this process.
- ❖ We also want to know if you are interested in working on a crew or acting as an understudy for the show.
- ❖ This "**AUDITION SHEET**" will be used to update our mailing list so that you will receive future audition notices and newsletters.
- ❖ Individuals who are cast in our shows are expected to help with other aspects of the production-gather props, construct scenery, build costumes, help with marketing or clean up. We don't have any full time paid staff to perform these functions. We need your help to make this a successful production. You will be asked to participate in the production process in some way; please understand that we are "in this together" and that your cooperation is a natural part of the community theatre experience.
- ❖ Keep this letter for you information! And visit our website or call for more information.

Thank you for your interest in the BACP. We look forward to the opportunity of working with you!

**BROKEN ARROW COMMUNITY PLAYHOUSE**

**AUDITION / INTAKE SHEET**

**PRODUCTION:** \_\_\_\_\_

**Perf. Dates:** \_\_\_\_\_

**NAME:** \_\_\_\_\_ **PRIMARY PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **ALTERNATEPHONE:** \_\_\_\_\_

**CITY, ST ZIP:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**EMERGENCY CONTACT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**PARENTS NAME IF MINOR** \_\_\_\_\_ **PARENTS PHONE :** \_\_\_\_\_

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**ROLE(s) PREFERRED:** \_\_\_\_\_

**WOULD YOU ACCEPT ANOTHER ROLE? Y** \_\_\_\_\_ **N** \_\_\_\_\_ **ROLE:** \_\_\_\_\_

**IF YOU ARE NOT CAST WOULD YOU CONSIDER AN UNDERSTUDY POSITION?: Y** \_\_\_\_\_ **N** \_\_\_\_\_

**WOULD YOU CONSIDER WORKING CREW OR HOUSE FOR THIS PRODUCTION?: Y** \_\_\_\_\_ **N** \_\_\_\_\_

**Please list any SCHEDULING CONFLICTS that might occur during this rehearsal / production period.**

When listing possible conflicts, please consider all school, work, church, personal or other organizational obligations you may have. It is up to the Director to decide whether your conflicts can be accommodated during the rehearsal process for this production. Try to be as complete as possible so the Director can make an informed decision. *Thank you.*

| <u>DAY/DATE/TIMES</u> | <u>DESCRIBE CONFLICT</u> | <u>IS THIS FLEXIBLE?</u> |
|-----------------------|--------------------------|--------------------------|
| _____                 | _____                    | _____                    |
| _____                 | _____                    | _____                    |
| _____                 | _____                    | _____                    |
| _____                 | _____                    | _____                    |
| _____                 | _____                    | _____                    |
| _____                 | _____                    | _____                    |
| _____                 | _____                    | _____                    |
| _____                 | _____                    | _____                    |
| _____                 | _____                    | _____                    |
| _____                 | _____                    | _____                    |

**SEX M ( ) F ( ) AGE RANGE:** \_\_\_\_\_ **UNDER 18 Y ( ) N ( ) TRANSPORTATION Y ( ) N ( )**

**COMMENTS:**  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE USE REVERSE TO LIST YOUR PRIOR THEATRE EXPERIENCE**

**PREVIOUS STAGE EXPERIENCE (Last four, list most recent first; attach resume if desired):**

| <u>ROLE</u> | <u>SHOW</u> | <u>WHERE / WHEN</u> |
|-------------|-------------|---------------------|
| _____       | _____       | _____               |
| _____       | _____       | _____               |
| _____       | _____       | _____               |
| _____       | _____       | _____               |

**LIST PREVIOUS BACK STAGE EXPERIENCE, if desired**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you appeared at the BACP before? \_\_\_\_\_ When? \_\_\_\_\_ In what role/Show? \_\_\_\_\_

Please describe any Theater training:

\_\_\_\_\_

\_\_\_\_\_

|                                |
|--------------------------------|
| <b>(For DIRECTOR Use Only)</b> |
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**NOTES:**

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\_\_\_\_\_

**VOCAL RANGE:** LOW \_\_\_ MID-RANGE \_\_\_ HIGH \_\_\_      **MOVEMENT:** LOW \_\_\_ MID-RANGE \_\_\_ HIGH \_\_\_

**PROJECTION:** LOW \_\_\_ MID-RANGE \_\_\_ HIGH \_\_\_      **PRESENCE:** LOW \_\_\_ MID-RANGE \_\_\_ HIGH \_\_\_

**CALL BACK:** Y \_\_\_ N \_\_\_      **ROLE(s):** \_\_\_\_\_      **ACTOR NOTIFIED:** Y \_\_\_ N \_\_\_

**CAST:** Y \_\_\_ N \_\_\_      **ROLE:** \_\_\_\_\_      **ACTOR NOTIFIED:** Y \_\_\_ N \_\_\_

**ACCEPTED:** Y \_\_\_ N \_\_\_

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Directors & Producers: if the Director needs to take forms with them, please make copies and return ALL original audition forms to the Office to be added to the talent data base. It is important to let everyone know where they stand by providing definite expectations of when, where, and how the cast will be posted. The BACP prefers that everyone be contacted whether cast or not. If you are uncomfortable doing this please ask for assistance. Thank you for being a part of our production.