

Attach headshot here

RAPUNZEL THE PANTO - AUDITION APPLICATION

YOUTH COMPANY AUDITION PERSONS DETAILS Please complete in block capital letters.

1. FULL NAME	
2. AGE	
3. DATE OF BIRTH (DD/MM/YYYY)	
4. HEIGHT (IN CM)	
5. HOME ADDRESS ADDRESS	
ADDRESS 2	
CITY/TOWN	
COUNTY	
POSTCODE.	
PERSON WITH PARENTAL RESPONSIBILITY PLEASE NOTE ALL COMMUNICATION FROM SP WILL BE SENT TO THE IN	NFORMATION BELOW.
6. PARENTAL FULL NAME	
7. RELATIONSHIP TO THE PERFORMER	

8. HOME TELEPHONE NUMBER
9. MOBILE TELEPHONE NUMBER
10. EMAIL ADDRESSES
1
2
11. EMERGENCY CONTACT FOR AUDITION DAY (20TH AUGUST)
NAMEEMAIL ADDRESS
PHONE NUMBER
12. DO YOU GIVE CONSENT FOR THE YOUNG PERFORMER TO AUDITION
YES
NO
13. AS PART OF THE CASTING PROCESS, WE MAY NEED TO TAKE PHOTOGRAPHS AND/OR VIDEOS OF THI YOUNG PERFORMER ON THE DAY OF THE AUDITION. THE PHOTOGRAPHS AND OR VIDEOS WILL BE TAKEN BY THE SP STAFF AND WILL BE DELETED ONCE THE PROCESS IS COMPLETE. THE PHOTOGRAPHS AND OF VIDEOS WILL BE STORED SECURELY AND NOT SHARED OUTSIDE THE ORGANISATIONS.
DO YOU CONSENT TO PHOTOGRAPHS AND OR VIDEOS BEING TAKEN OF THE YOUNG PERFORMER DETAILS ABOVE?
YES
NO
14. SIGNED

PLEASE RETURN YOUR COMPLETE AUDITION FORM BACK TO kiri@starcastperformingarts.co.uk By 5.00PM ON SATURDAY 6TH AUGUST 2022