

**DMTC Youth Show AUDITION:
BEAUTY AND THE BEAST JR - JAN 10-11, 2022**

~ Please Print ~

All contact information for cast members will be taken from this form.

Auditioner's Name (PLEASE PRINT) _____

Home Phone (_____) _____ Student's Cell Phone (If Applicable) (_____) _____

Parent's Name: _____ Parent's Cell Phone (If Applicable) (_____) _____

Parent's Name: _____ Parent's Cell Phone (If Applicable) (_____) _____

Parent's email address: (please print clearly) _____

Parent's email address: (please print clearly) _____

Student's email address: (If applicable) _____

I have read the information sheet provided and I understand that:

- All conflicts must be noted on the audition form and I agree to attend all other rehearsals.
- Tech week rehearsals and all performances are mandatory for every cast member.
- Cast members cannot change or alter their appearance after auditions without the director's consent.
- Performers AND volunteers must follow current COVID policies and procedures, including testing requirements.
- There is a mandatory volunteer requirement as follows *:
 - o **Twenty-five volunteer hours** per performer (35 hours for 2 performers and 40 hours for 3 or more performers), which are assigned to pre-production (sets, costuming, props, etc) and production needs (stage crew, dressing room monitors, box office, etc).
 - o Participation in strike following the production.
- Fees include a non-refundable **\$100** production fee and a **\$75** costume fee per cast member. *
- A parent, guardian or sponsor must attend the Parent Meeting: **TUESDAY, January 18, 2022 at 5:30 pm**

Please check the necessary boxes below:

- One parent/guardian is available for the Mandatory Parent Meeting.**
- We are not available for the Parent Meeting. *Please speak with the audition coordinator TODAY, AT AUDITIONS***
- I have a concern which I would like to discuss with the director prior to casting the show. Please have the director contact me at the following phone number: _____**

Parent Signature

Date

Auditioner Signature

Date

Other Notes:

*If for any reason you are unable to commit to the financial and/or volunteer requirements as listed above, please speak with the producer/communication coordinator before today's audition. Scholarship and/or sponsorship applications are available.

If a performer drops out after casting, it may impact their future roles for DMTC YPT productions.

Performers are discouraged from being cast in both the DMTC Main Stage and YPT shows at the same time.

Special permission from both directors must be obtained before a young performer can participate in both shows.

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PARENT ACKNOWLEDGEMENT FORM**

Mission Statement

Davis Musical Theatre Company (DMTC) is an all volunteer organization. The primary goal of DMTC's Young Performers' Theatre (YPT) is to provide opportunities for youth of various ages and diverse backgrounds to participate in and experience theater. Through exposure to the theater arts, YPT participants improve their theater skills and learn about the process of bringing a production to a successful presentation. By taking part, participants are given opportunities to build organizational skills, self-confidence and positive character.

I acknowledge the following parent requirements by initialing next to each:

_____ I understand that I **must** advise the director or audition coordinator if my child has any medical conditions, special needs, or occasional behavioral issues. (Examples include: frequent migraines, dyslexia, anxiety, challenges with attention, sensory processing issues, need for a service dog, etc.) This information will be held in confidence. Please call me at this number to discuss (if relevant) _____.

Note - such conditions or needs do not influence casting if the director feels that your child is ready to be in a show based on their audition. Knowing about special issues simply allows the director to understand your child and work with them to perform their best.

_____ I understand that a parent/other adult is required to perform volunteer hours before and/or during the production (25 hours for one performer, 35 hours for 2 performers and 40 hours for 3 or more performers).

_____ I understand that a parent/other adult must attend "strike" which follows the final performance on Sunday, **APRIL 3, 2022**, ~4:00pm - 6:00pm (dismantling sets, returning costumes, theater cleaning, etc.).

_____ I understand that there is a mandatory Parent Meeting for all performers who are selected for the cast. A \$100 administration fee and a \$75 costume fee will be collected at that time for this production.

_____ I will speak to the director or the audition coordinator today if it is a hardship for my family to commit to the financial or volunteer requirements as listed. The theater is willing to create a plan for volunteer hours, scholarships and/or payment plans, as needed.

Parent Name _____ (Print) Auditioner Name _____ (Print)

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Auditioner's Name: _____ **Preferred Pronoun (OPTIONAL):** _____

Age: _____ **Grade:** _____ **Birth date:** ____/____/____

Casting Preferences:

Roles preferred: _____

Will you accept other roles? (circle one) **Yes** **No**

Will you accept ensemble? (circle one) **Yes** **No**

Are there any roles you will **not** accept?: _____

◇ Check here if: I will only accept a role if my sibling / friend, _____, is also cast in the production.

If there are not enough actors for Beauty and the Beast Jr., the show will change to Pinocchio. Will you accept a role in Pinocchio if this occurs? (circle one) **Yes **No**

Experience: (List experience or attach resume. Please attach another sheet if this space is not enough.)

Schedule/Conflicts:

Please cross out any date where you have a scheduled conflict during the rehearsal period. Include all dates **whether or not a rehearsal is scheduled**. If the director offers you a role, it means that they will work around your listed conflicts. If you do not mention a conflict, unless you are ill or have an emergency situation, **you are expected to be at rehearsal**. No conflicts permitted during tech week or performances.

Place an X through the dates of all conflicts. Please use the space at the bottom of this page to make any special notes.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1/17	1/18 Read thru 4:30-6:30 Parent Mtg 5:30-6:30	1/19 4:30 - 6:30	1/20 4:30 - 6:30	1/21	1/22
1/23	1/24 4:30 - 6:30	1/25 4:30 - 6:30	1/26 4:30 - 6:30	1/27 4:30 - 6:30	1/28	1/29
1/30	1/31 4:30 - 6:30	2/1 4:30 - 6:30	2/2 4:30 - 6:30	2/3 4:30 - 6:30	2/4	2/5 Preproduction Workday
2/6 Preproduction Workday	2/7 4:30 - 6:30	2/8 4:30 - 6:30	2/9 4:30 - 6:30	2/20 4:30 - 6:30	2/11	2/12 Preproduction Workday
2/13 Preproduction Workday	2/14 4:30 - 6:30	2/15 4:30 - 6:30	2/16 4:30 - 6:30	2/17 4:30 - 6:30	2/18	2/19 Preproduction Workday
2/20 Preproduction Workday	2/21 4:30 - 6:30	2/22 4:30 - 6:30	2/23 4:30 - 6:30	2/24 4:30 - 6:30	2/25	2/26 Preproduction Workday
2/27 Preproduction Workday	2/28 4:30 - 6:30	3/1 4:30 - 6:30	3/2 4:30 - 6:30	3/3 4:30 - 6:30	3/4	3/5 Preproduction Workday
3/6 Preproduction Workday	3/7 TECH WEEK 4:00-8:00	3/8 TECH WEEK 4:00-8:00	3/9 TECH WEEK 4:00-8:00	3/10 TECH WEEK 4:00-8:00	3/11	3/12 OPENING SHOW 2:00
3/13	3/14	3/15	3/16/	3/17	3/18	3/19 SHOW 2:00
3/20	3/21	3/22	3/23	3/24	3/25	3/26 SHOW 2:00
3/27	3/28	3/29	3/30	3/31	4/1 SHOW 7:00	4/2 SHOW 2:00
4/3 SHOW 2:00 & MANDATORY STRIKE						

Please check one of the following: I have listed all conflicts above. ~ or ~ I do not have any conflicts

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COVID-19 Protocols:

Please note that COVID protocols are constantly evolving as the COVID situation changes. DMTC follows all county mandates, and makes every effort to put in place additional measures to keep our cast, production crew, and audiences safe.

Current COVID protocols are as follows:

- All performers participating in a YPT production will **wear a mask** during auditions, rehearsals and shows.
- Everyone** entering the theater **must wear an appropriate mask**.
- All actors will utilize Healthy Davis Together free COVID-19 Testing or another testing facility and report the results **twice** per week. <https://healthydavistgether.org/testing/> TESTING RESULTS MUST BE REPORTED TO THE COMMUNICATIONS COORDINATOR in order to continue participating in the production.
- All volunteers and production staff will utilize Healthy Davis Together free COVID-19 Testing or another testing facility and provide a negative test result within the 72 hours prior to the volunteer shift.
- All actors and YPT volunteers/parents/guardians must self-certify NO to the following questions to be allowed to enter DMTC.
 - Have you experienced any of the following symptoms in the past 48 hours:
 - Fever or chills
 - Cough
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - Headache
 - New loss of taste or smell
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea
 - Are you isolating or quarantining because you tested positive for COVID-19 or are worried that you may be sick with COVID-19?
 - Have you been in close physical contact in the last 14 days with:
 - Anyone who is known to have laboratory-confirmed COVID-19?
 - Anyone who has symptoms consistent with COVID-19?

I understand and agree to follow DMTC's COVID policies - even in the event they change during the run of this show.

Parent Signature

Date

Auditioner Signature

Date