



## Cinderella Audition Packet

Thank you for auditioning for Sierra School of Performing Arts' upcoming musical production of *Cinderella*! Below is information you will need regarding auditions, rehearsals and performances. **Read this packet carefully.** Once you have filled out your Audition Information Form, turn it in at the audition with a signature from yourself **and** a parent (if you are a minor).

**The Show:** *Cinderella*: September 4, 5, 6, 11, 12, 13, 2015 at the Hawkins Outdoor Amphitheater, Bartley Ranch, Reno.

**Auditions:** Auditions for *Cinderella* will be held Sunday May 3rd from 1:00 – 4:00p and Wednesday May 5th from 5:30 to 8:30 p.m. at South Reno United Methodist Church at 200 De Spain Lane (across from Galena High School). Call backs will be Saturday, June 9<sup>th</sup> from 12:00p-5:00p. We need an all ages cast from 9 years and up. Rehearsals will be most Tuesday, Wednesday and Thursday nights starting June 9th.

**Those auditioning should prepare 16 bars of a song from a Broadway musical and a 1- minute monologue. Callbacks will be Saturday, May 9<sup>th</sup> from 12:00p-5:00p at SRUM Church. Bring a headshot (5 x 7 is preferred) and the audition packet to the audition.**

**What Happens After Auditions?** The *Cinderella* cast list will be posted and sent via e-mail. We will ask that you confirm with us that you accept and agree to be part of the show. The TENTATIVE rehearsal schedule is attached. The first rehearsal (6/9) will begin with a mandatory informational parent (and adult cast member) meeting. It's very important that a parent or guardian for every minor cast member attend.

### **Attendance:**

If you accept your role, you are agreeing to be available for ALL scheduled rehearsals, as well as performances. You **MUST** list **ALL** conflicts or issues you anticipate regarding attendance on the Audition Information Form. If you cannot attend a rehearsal, you must notify us **in advance** so we can try to work around you but you risk having your role re-cast; **“No-shows” may lose their part or be removed from a scene.** We realize summer vacations, emergencies or conflicts arise.... all we ask is that you make every effort to keep in contact with us! **Each cast member must sign in and out of each rehearsal.**

**Behavior:** Our goal is to have a great time, learn and put on a fabulous production. We expect all cast members to be courteous and treat everyone, including theaters spaces and costumes with respect.

**Rehearsal Schedules:** The first rehearsal and mandatory Parent/Cast meeting is June 9th. Rehearsals will be most Tuesday, Wednesday and Thursday nights from 6:00p-9:00p. You **MUST** attend all technical and dress rehearsals. Detailed weekly schedules will be e-mailed to the cast by Friday. If you do not receive a schedule by Friday, please contact us! **Not everyone will be needed at every rehearsal.**

**Fees:** Producing Theater is expensive. We write grants to cover production fees but they can never cover all the costs of such a big production as this. Therefore production fees will be \$75 per person. Scholarships are available on the website. To apply for a scholarship please download the application and bring it with you to auditions. All applications **MUST BE** submitted by June 9th to qualify for consideration.

**Corporate/Personal Sponsorships:** Please let us know if you know of any person or organization that would be interested in sponsoring us.

**Sign in and Sign Out:** Each cast member must sign in and out of each rehearsal. If your child is 15 or younger a parent must sign in and out for the child. Parents please be respectful of our time and drop off and pick-up your child on time.

### **Cinderella**

#### **Master Rehearsal Schedule: 4-21-15**

Sun	5/2	AUDITIONS 1:00p-4:00p
Tues	5/5	AUDITIONS 5:30p-8:30p
Sat	5/9	Call Backs (12:00p-5:00p)
Tues	6/9	6:00-6:45 Parent/Cast meeting. 7-9:00 rehearsal.
Wed	6/10	6:00-9:00p
Thurs	6/11	6:00-9:00p
Tues	6/16	6:00-9:00p
Wed	6/17	6:00-9:00p
Thurs	6/18	6:00-9:00p
Tues	6/23	6:00-9:00p
Wed	6/24	6:00-9:00p
Thurs	6/25	6:00-9:00p
Tues	6/30	6:00-9:00p
Wed	7/1	6:00-9:00p
Thurs	7/2	6:00-9:00p
Tues	7/7	6:00-9:00p
Wed	7/8	6:00-9:00p
Thurs	7/9	6:00-9:00p
Tues	7/14	6:00-9:00p
Wed	7/15	6:00-9:00p
Thurs	7/16	6:00-9:00p
Tues	7/21	6:00-9:00p
Wed	7/22	6:00-9:00p
Thurs	7/23	6:00-9:00p
Tues	7/28	6:00-9:00p
Wed	7/29	6:00-9:00p
Thurs	7/30	6:00-9:00p
Tues	8/4	6:00-9:00p
Wed	8/5	6:00-9:00p
Thurs	8/6	6:00-9:00p
Tues	8/10	6:00-9:00p
Wed	8/11	6:00-9:00p
Thurs	8/12	6:00-9:00p
Tues	8/18	6:00-9:00p
Wed	8/19	6:00-9:00p
Thurs	8/20	6:00-9:00p
Tues	8/25	6:00-9:00p

Wed 8/26 6:00-9:00p  
Thurs 8/27 6:00-9:00p

**Hawkins Amphitheater at Bartley Ranch:**

Sun 8/30 12:00p – 3:00p Move in/assemble set/Tech  
Mon 8/30 3:00p – 5:00p set details/5:00-10:00p tech  
Tue 9/1 3:00p – 5:00p set details/5:00-10:00p tech  
Wed 9/2 3:00p – 5:00p set details/5:00-10:00p Dress Rehearsal  
Thurs 9/3 5:00p–10:00p Dress Rehearsal  
Fri 9/4 Evening Show 7:30p (doors open @ 6:30p, cast call 6:00p)  
Sat 9/5 Evening Show 7:30p (doors open @ 6:30p, cast call 6:00p)  
Sun 9/6 Evening Show 7:30p (doors open @ 6:30p, cast call 6:00p)  
Thurs 9/10 Rehearsal 6:00-10:00p  
Fri 9/11 Evening Show 7:30p (doors open @ 6:30p, cast call 6:00p)  
Sat 9/12 Evening Show 7:30p (doors open @ 6:30p, cast call 6:00p)  
Sun 9/13 Evening Show 7:30p (doors open @ 6:30p, cast call 6:00p)  
Sun 9/13 STRIKE SET – MANDATORY AFTER SHOW

List dates of any conflicts or issues you anticipate. Include other productions you are in:

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Parent Notified: \_\_\_\_\_



SIERRA SCHOOL OF  
Performing Arts

Audition # \_\_\_\_\_

## Audition Information Form

Place photo here

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Parent or main contact e-mail \_\_\_\_\_

Cast member e-mail: \_\_\_\_\_

We would like to put together a cast contact sheet and distribute it to other performers. May we release your contact information? Yes \_\_\_\_\_ No \_\_\_\_\_

School: \_\_\_\_\_

Gender: M or F    Age: \_\_\_\_\_    Grade: \_\_\_\_\_    Height: \_\_\_\_\_

T-shirt size: \_\_\_\_\_

Phone: (list all) Home: \_\_\_\_\_

Parent cell: \_\_\_\_\_

Auditioner cell: \_\_\_\_\_

List dates of any conflicts or issues you anticipate. Include other productions you are in:

\_\_\_\_\_  
\_\_\_\_\_

Does your parent(s) or family member have any abilities or experience that could help support this production? (costumes, props, technical, graphic design, etc) *If yes, please describe:*

\_\_\_\_\_  
\_\_\_\_\_

I have read and understand the commitment and responsibilities outlined in the above information: **auditioner's signature and date** \_\_\_\_\_

**Parent signature and date** \_\_\_\_\_

**Please provide the information below or attach your resume:**

Drama, Dance or Vocal **Experience:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What part do you usually sing: \_\_\_\_ Soprano \_\_\_\_ Alto \_\_\_\_ Tenor \_\_\_\_ Bass

Drama, Dance or Vocal **Training:** (Be specific – years studied, instructors or schools, specific styles, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special or Unusual **Talents:** \_\_\_\_\_

How did you hear about our auditions? (Flyer, email, SSPA website, Facebook, other internet, newspaper, radio, friend, magazine)

\_\_\_\_\_

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Audition Packet Terms – Please initial (both auditioner and parent) each to indicate you have read and understand:

Attendance \_\_\_\_\_

Behavior \_\_\_\_\_

Parent Meeting \_\_\_\_\_

Rehearsal Schedules \_\_\_\_\_

Fees \_\_\_\_\_

Sign In/Out \_\_\_\_\_

Parent Pick Up \_\_\_\_\_

I have read the Audition Packet and agree to all of the terms. (*auditioner's signature and date*)

\_\_\_\_\_  
I have read the Audition packet and agree to all of the terms. (*parent signature if cast member is a minor and date*)

\_\_\_\_\_



## Emergency Contacts

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Mother's phone: \_\_\_\_\_ Father's Phone: \_\_\_\_\_

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Two persons you recommend we call in the event you cannot be reached:

- |    | <u>Name</u> | <u>Phone Numbers (list all relevant numbers)</u> |
|----|-------------|--|
| 1) | _____       | _____  |
| 2) | _____       | _____  |

Preference of physicians: (please include name, telephone and address.)

- |    |       |           |         |
|----|-------|-----------|---------|
| 1. | _____ | _____     | _____   |
|    | Name  | Telephone | Address |
| 2. | _____ | _____     | _____   |
|    | Name  | Telephone | Address |

If neither physician is available, do we have permission to take your student to a hospital or available physician? \_\_\_\_\_ Yes \_\_\_\_\_ No

Preference of Hospital: \_\_\_\_\_

Medical history and physical limitations or problems that should be known by the director and staff: \_\_\_\_\_

In case of emergency and the above contacts cannot be reached, I authorize Sierra School of Performing Arts to seek medical treatment.

\_\_\_\_\_  
Signature Printed Name

Please list all people who are authorized to pick up your student after rehearsal:

- |    |       |    |       |
|----|-------|----|-------|
| 1. | _____ | 2. | _____ |
| 3. | _____ | 4. | _____ |



## RELEASE AND AUTHORIZATION TO PHOTOGRAPH

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, I hereby grant the undersigned photographer ("Photographer") the irrevocable right and permission, throughout the world, in connection with the photographs taken of me, or in which I may be included with others, the following: (a) the right to use and reuse, in any manner at all, said photographs, in whole or in part, modified or altered, either by themselves or in conjunction with other photographs, in any medium or form of distribution, and for any purposes whatsoever, including, without limitation, all promotional and advertising uses, and other trade purposes, as well as using my name in connection therewith, if he so desires; and (b) the right to copyright said photographs in his own name or in any other name that he may select. I waive the right to inspect or approve any use thereof.

I hereby forever release and discharge Photographer from any and all claims, actions and demands arising out of or in connection with the use of said photographs, including, without limitation, any and all claims for invasion of privacy and libel. This release shall inure to the benefit of the assigns, licensees and legal representatives of Photographer, as well as the party(ies) for whom he took said photographs.

Please check one:

\_\_\_\_\_ I represent that I am over the age of eighteen years and that I have read the foregoing and fully and completely understand the contents hereof.

\_\_\_\_\_ I represent that the child is a minor and that I am the parent or duly authorized representative of the child and that I have read the foregoing and fully and completely understand the contents hereof.

Photographer: Sierra School of Performing Arts

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of actor or parent if actor is a minor)

\_\_\_\_\_  
(Print name, both parent and actor if needed)

Phone: \_\_\_\_\_

\_\_\_\_\_  
(Address)