



Falls Patio Players Audition Form – The Musical Comedy Murders of 1940

Audition # _____ Name _____

Address: _____

City, State, Zip: _____

Phone #: _____

Email: _____

Preferred Pronouns: _____

List specific role(s) you are interested in: _____

Will you accept another role ? _____

Check if interested in helping with crew/ set construction when not scheduled for rehearsal

Check if you have a family member interested in crew/set construction

Check if you would like to be added to Patio's Email List

Please tell us how you learned about the audition: _____

Please note all rehearsal conflicts August 15 – September 22

Please list recent/relevant experience (show, date, role, company, director) Continue on the back or attach a separate page, if necessary.

Audition# _____

Name _____

Please acknowledge the following by providing a signature below:

Performance Dates are September 23, 24, 25, 30, October 1, 2, 2022

Cast Members will be required to join the Fall Patio Players. Our annual membership fee is \$10.00 per individual or \$20.00 per family.

Permission is granted to Falls Patio Players to use my image in photos and videos to promote the organization. (Strike if permission is denied)

I understand that I have requested to participate in a program sponsored by the Falls Patio Players, Inc. I further understand that with my acceptance and participation there is some inherent risk, and I assume full responsibility for any injuries or illness incurred by me while participating in this program.

Participant's Name: _____

Signature of Participant: _____

Date: _____

Falls Patio Players strives to be a welcoming, diverse company of volunteers and professionals dedicated to producing inspiring, affordable entertainment while offering opportunities to develop skills in all aspects of theatrical productions. We aspire to make our community theater your second home.